

L10000131964

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

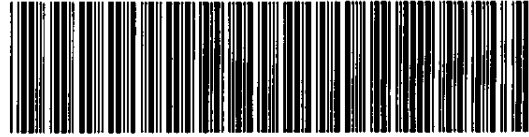
(Business Entity Name)

(Document Number)

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FILED
2011 JUL 25 PM 2:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
JUL 26 2011
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 6, 2011

JORDAN ROBINSON
INNOVATIVE ONE LLC
223 E. FLAGLER STREET, SUITE 518
MIAMI, FL 33131

SUBJECT: INNOVATIVE ONE, LLC
Ref. Number: L10000131964

We have received your document for INNOVATIVE ONE, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

If you have any further questions concerning your document, please call (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 211A00013742

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: INNOVATIVE ONE LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JORDAN ROBINSON
Name of Person

INNOVATIVE ONE, LLC
Firm/Company

223 E FLAGLER ST #519
Address

MIAMI / FL / 33131
City/State and Zip Code

Jordan@innovative-one.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JORDAN ROBINSON at (847) 400-7741
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount: ***ALREADY PAID***

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

INNOVATIVE ONE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12/29/2010 and assigned Florida document number L10000131964.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

223 E FLAGLER ST
SUITE # 518
MIAMI, FL 33131

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

JORDAN ROBINSON

New Registered Office Address:

223 E FLAGLER ST, SUITE 518
Enter Florida street address
MIAMI, Florida 33131
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	ZORIANA FOLCOCHKA	3491 SW 23RD ST MIAMI, FL 33145	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated JULY 26 2011

 Signature of a member or authorized representative of a member
JORDAN ROBINSON
 Typed or printed name of signee

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 TALLAHASSEE, FLORIDA