114000024942

(Requestor's Name)
(Address)
(Address)
((daless)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
•
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
appealar managaris to running officer.

Office Use Only



900258411409

04/04/14--01030--004 **25.00



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 3 Interviews LC dame name to Name of Limited Liability Company Invended Interviews LC Invended Interviews LC
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jud Treland Name of Person
New Name: Immediate Interviews
50 South Pointe Drive unit 1401
Miami Bead, FL 33139 City/State and Zip Code TP. Tre land @ amail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tid Treland at (516) 379-7745 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solutional copy is enclosed Solutional Copy Solutional C
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

3 Interviews LUC	
(Name of the Limited Liability Compar (A Florida Limited L	iy as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company	were filed on Feb 12 20 and assigned
Florida document number <u>LI40000</u> 24	942
This amendment is submitted to amend the following:	TALLAP
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and end with the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "LLC"
Enter new principal offices address, if applicable:	50 South Pointe Prive
(Principal office address MUST BE A STREET ADDRESS)	Unit 1401 Deach FL33139
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent: Jud J	Treland
New Registered Office Address: 50 Sou	th Pointe Drive ont 1401 Enter Florida street address
Miami B	each
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 605, 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.

If Charging Registered Agent, Signature of New Registered Agent

Page 1 of 3

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

MGR = Manager

AMBR = Aut	horized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
Manager	Jud Ireland	50 South Pointe Dr. Unit 140 Miami Beach, FL. 331	□ Add 139 □ Remove
Monager	David Naylor	18190 Sandy Pine Circle Ft. Meyers FC 3391	Add □ Add Remove
			Add
		SECRE IANY OF STATE TALLAHASSEE, FLORIDA	Remove
		FLORIDA	Add
			□ Remove
			□ Add
			🗆 Remove
			□ Add
			□ Remove

	• .	
		
ective date, if other effective date must be sp date this document is file	than the date of filing: ecific, cannot be prior to date of receipt or filed de d by the Florida Department of State)	(optional) ate and cannot be more than 90 days after
ed April ?	2 2014	
, 1011	Lowland	

Page 3 of 3

Filing Fee: \$25.00

14 APR -4 PH 2: 4.9
SECKETARY OF STATE
TALLAHASSEE, FLORIDA