

Division of Corporations

Page 1 of 1

L14000062553

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000169575 3)))



H140001695753ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : ASMA & ASMA, P.A.
Account Number : I20060000067
Phone : (407) 656-5750
Fax Number : (407) 656-0486

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: nick.asma@asmapa.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ILIONO, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

RECEIVED

14 JUL 16 PM 1:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDASECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 JUL 16 AM 8:20

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

JUL 17 2014

H14000169575 3

FILED
14 JUL 16 AM 8:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
ILIONO, LLC
(L14000062553)**

Pursuant to the provisions of Section 605.0202, Florida Statutes, this Florida Limited Liability Company adopts the following amendments to its Articles of Organization which were filed on April 15, 2014.

AMENDMENTS ADOPTED

ARTICLE III is amended as follows:

ARTICLE III REGISTERED AGENT

Gilbert L'Hommedieu has tendered his resignation as Registered Agent of the Company. The new Registered Agent and their address shall be:

ASMA & ASMA PA
884 S Dillard Street
Winter Garden Florida 34787

Signature: _____

Gilbert L'Hommedieu, Current Registered Agent

Signature: _____

Gilbert L'Hommedieu, Manager

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.

C. Jack Asma Esquire
Asma & Asma PA

884 S Dillard St Winter Garden Florida 34787

H14000169575 3