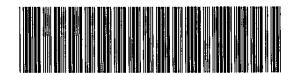
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT:		IFL	OW LLC					
		Name of Lim	ited Liability Co	ompany				
The enclosed Article	es of Ame	ndment and fee(s) are sul	bmitted for filin	g.				
Please return all cor	responden	ce concerning this matter	r to the followin	g:				
	_	Andrea M. Cameron						
	Name of Person							
	ASSETMG LLC							
	Firm/Company							
	453 18TH AVE. SOUTH							
	Address							
NAPLES, FL 34102								
	City/State and Zip Code							
		al.dds@hotmail.com E-mail address: (to be used for future annual report notification)						
For Contract to Conse	··			ure annual report norm	ication)			
ror lurtner informat	non concer	ming this matter, please o	can:					
		. Cameron	at (_2:		398-4486			
N	ame of Pers	on		Area Code & Daytime	e Telephone Number			
Enclosed is a check	for the fol	lowing amount:						
\$25.00 Filing Fe	ee 🔲	\$30.00 Filing Fee & Certificate of Status	Certifie	iling Fee & d Copy nal copy is enclosed) Certified	e of Status &		
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				STREET/COURI Registration Section Division of Corporn Clifton Building 2661 Executive Central Tallahassee, FL 32	n rations rnter Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLOW LLC		
y Company as it now appea Limited Liability Company)	rs on our records.)	
Company were filed on	04/20/2011	and assigned
·		
ited liability company he	<u>re</u> :	
rds "Limited Liability Comp	any," the designation "l	LC" or the abbreviation
RESS)		
		San
		2 0C
		NSS CO THE
tered office address on ress here:	our records, <u>enter f</u>	he name of the new
	Ι,	
Er	nter Florida street ada	ress
City		Zip Code
	Company as it now appea Limited Liability Company) Company were filed on ited liability company her rds "Limited Liability Company RESS) tered office address on a lress here:	Company as it now appears on our records, Limited Liability Company) Company were filed on

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.

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 **Address** Type of Action Name MGR Andrea M. Cameron 453 18th AVE. SOUTH ___ Add Remove NAPES, FL 34102 ☐ Add Remove ☐ Add Remove ☐ Add Remove ___Add Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated October 19 2012 Signature of a member or authorized representative of a member Cameron Andrea M

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee