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Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : SMALL BUSINESS RESOURCES USA, INC.

Account Number : 120040000173 Phone : (407)298-4646

Fax Number : (407)297-0588

1 13-21178

SECKTIONS FORM TO THE STATE OF THE STATE OF

LIMITED LIABILITY AMENDMENT

ISLAND BREEZE HOMEOWNER SOLUTIONS, LLC.

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$30.00

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Island Breeze Homeowner Solutions, LLC			Fax # H050001811373				
_	(A Flo	(Present Nam prida Limited Liabi	e) ity Company)					
,								
FIRST:	The Articles of Organization were find document number <u>L03000021178</u>	iled on 06/09/03		and	l assigned			
SECOND:		the Articles of	Organization	was/were	adopted 1	by the l	imited	
	Article I: The name of the Limited I Island Breeze Homeowne	lability Company r Financial Solution	is changed to ons, LLC	-				
	This change is to be effect	tive immediately.						
					;			
						SEC.	05 JI	gaar ge
:						HAS.	JL 28	(—1
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:						ELOR ELOR	AH 10: 0	1225 T. 128
Dated	July 27 , 2	2005			4	Pm A	9	
•					•	·		
	Signature of a mem	per or authorized re	presentative of	a member				
:	James K. Duerr, CPA as Agent			ıdit # H050	00018113	73		
	Тур	ed or printed name	of signee					

Filing Fee: \$25.00

TRANSMITTAL LETTER

TO:	Registration Sec Division of Con					
SUBJE	CT: Island Bre	eze Homeowner Solutions	s, LLC	Fax Audit # HQ5	5000181137 3	
		(Name of I	Limited Liability C	ompany)		
The end	closed Articles of	Amendment and fee(s) are s	ubmitted for filing.			
Picase :	return all correspo	ndence concerning this matt	er to the following:	•		
		Jam	es K. Duerr, CPA	<u> </u>		
		_	(Name of Person)			
		Small Bu	usiness Resource	s USA, Inc.		
			(Firm/Company)			
:		773 S.	Kirkman Rd., Ste	e. 118		
•			(Address)		:	
:		Orlai	ndo, FL 32811		TAL	9
;	 -	(City	/State and Zip Code)	· · · · · · · · · · · · · · · · · · ·	<u></u> <u></u>	
For furti	ner information co	ncerning this matter, please	call:		ASSEE	28 A
;	Audit # H05000	181137 3 James K. Due	rr, CPA at (407	298-464	5 <u>デ</u> ジ,	=======================================
		(Name of Person)	(A.	rea Code & Daytime	Telephone Number	9:09
Enclosed	is a check for the fo	llowing amount:			i	
J \$25.00) Filing Fee	S30.00 Filing Fee & Certificate of Status	S\$5.00 Filing Certified Co (additional o		☐ \$60.00 Fiting Fee, Certificate of Status & Certified Copy (additional copy is en	:
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