


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 09, 2006 8:00 am
Secretary of State

03-09-2006 90003 035 ****85.00

DOCUMENT # L04000024281

1. Entity Name
INVESTIGATIVE TRAINING, L.L.C.




Principal Place of Business
**962 NORTHLAKE BOULEVARD, PMB 159
 LAKE PARK, FL 33403**

Mailing Address
**962 NORTHLAKE BOULEVARD, PMB 159
 LAKE PARK, FL 33403**

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country



03062006 Chg-LLC CR2E083 (11/05)

4. FEI Number
NOT APPLICABLE Applied For
 Not Applicable

5. Certificate of Status Desired **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BLAKLEY, DANA
 962 NORTHLAKE BOULEVARD, PMB 159
 LAKE PARK, FL 33403**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	MGRM	<input type="checkbox"/> Delete	TITLE	Manager	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BLAKLEY, DANA		NAME	Blakley, Timothy J	
STREET ADDRESS	962 NORTHLAKE BOULEVARD, PMB 159		STREET ADDRESS	962 Northlake Blvd PMB 159	
CITY-ST-ZIP	LAKE PARK, FL 33403		CITY-ST-ZIP	LAKE PARK, FL 33403	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Dana Blakley Dana Blakley 3/9/06 561 722 5227
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

ATTACHMENT

20014366

#L04000024281

Investigative Training, LLC

(Present Name)

(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 3/30/04 and assigned document number L04000024281

SECOND: This amendment is submitted to amend the following:

The name of the LLC from
Investigative Training LLC to
Erin Enterprises

In addition I am adding
T. Johnston Blakley as a manager.

Dated 3/7, 2006

Dana Blakley

Signature of a member or authorized representative of a member

Dana Blakley

Typed or printed name of signee

COVER LETTER

ATTACHMENT

20014306

#L04000024281

TO: Registration Section
Division of Corporations

SUBJECT: Investigative Training 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:

change to: Dana Blakley
(Name of Person)
Investigative Training, LLC presently
Erin Enterprises LLC
(Firm/Company)

962 Northlake Blvd PMB 159
(Address)

Lake Park, FL 33403
(City/State and Zip Code)

For further information concerning this matter, please call:

Dana Blakley at (561) 722 5277
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$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