# 105000003765

(Requestor's Name)				
(Ad	ldress)			
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(Cit	ty/State/Zip/Phone	· #)		
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PICK-UP	☐ WAIT	MAIL		
	L	140 (12		
(Bu	siness Entity Nam	ne)		
·	·	•		
(Do	ocument Number)			
Certified Copies	Certificates	of Status		
Special Instructions to	Filing Officer:			
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01/29/09--01017--018 \*\*55.00

DIVISION 29 AMIL: 57

J. BRYAN

JAN 3 0 2009 .

**EXAMINER** 

## **COVER LETTER**

Division of Corp	orations		
SUBJECT: INTELL	INVESTMENTS PA	ARTNERS II.C	6
SUBJECT: MATERIAL		ited Liability Company)	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspor	dence concerning this matter	to the following:	
		ve me rane ming.	
	JĖNNIFER ANNE GORE	E MAGLIO, ESQUIRE	
		(Name of Person)	white the form the second of t
	MAGLIO CHRISTOPHER	R & TOALE LAW FIRM	
	MA CELO OTTICO	(Firm/Company)	
		0.475 004	c)
	1751 MOUND STREET, SUITE 201		
		(Address)	AL SECRE
	SARASOTA, FL 34236		09 JAN 29 AM 11: 57
		(City/State and Zip Code)	The state of the s
			3
For further information co	incerning this matter, please ca	all:	v. 5
JENNIFER MAGLIO		at ( 941 ) 952-5242	<i>→ 7</i>
(Name o	f Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for th	e following amount:	<b>A</b>	
□ \$25.00 Filing Fee	□\$30.00 Filing Fee &	\$55.00 Filing Fee &	□\$60.00 Filing Fee,
□ \$25.00 Thing Fee	Certificate of Status	Certified Copy	Certificate of Status &
		(additional copy is enclosed)	Certified Copy
			(additional copy is enclosed)

### MAILING ADDRESS:

TO:

**Registration Section** 

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**

INTELL INVESTMENT PARTNERS, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on 01/12/2005	and assigned
Florida document number L05000003765		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
CALDAL, LLC		
The new name must be distinguishable and end with the words "Lim "L.L.C."	ited Liability Company," the designation	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
· ·		
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 her		er the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
Non Registered Sylles Hadress.	(Enter Florida stree	t address)
		1
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent	<u>i</u>	
I hereby accept the appointment as registered agent and age the provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	olete performance of my duties, an provided for in Chapter 608, F.S.	d I am familiar with and Or. if this document is

(If Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Man $MGRM = M$	ager anaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information, enter change(	(s) here: (Attach additional sheets, if necessary.)	DIVISION OF CORPORATIONS  O9 JAN 29 AH 11:57
Dated JANU	ARY 26, , 2009	<del></del> •	
	Signature of a member of	or authorized representative of a member	
	JENNIFER ANNE GORE	MAGLIO, ESQUIRE or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00