

60500005458

(Requestor's Name)

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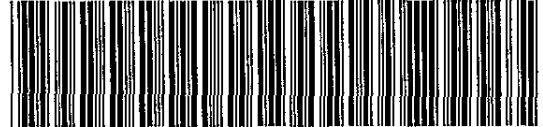
(Business Entity Name)

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TALLAHASSEE, FLORIDA

605-5458  
OK



Robin H. Doxey  
Juris Doctorate in Law  
Master of Laws in Taxation  
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February 22, 2005

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**SENT VIA CERTIFIED MAIL, RETURN RECEIPT REQUESTED**  
**# 7003 0500 0001 6384 7543**

**Re:** Filing of Amended Articles of Organization  
INFINITE SERVICES OF NAPLES, LLC  
*Our File no. 5515.5*

Dear Sir/Madam:

Enclosed is the Articles of Amendment to Articles of Organization for the above-referenced registration number, together with check # 10034 in the amount of \$25, representing your filing fee. Please acknowledge receipt of the within document by stamping the duplicate copy of this cover letter and returning to me in the prepaid envelope provided.

Please feel free to contact me if you have any questions.

Very truly yours,

A handwritten signature in cursive script that reads 'Robin H. Doxey'.

Robin H. Doxey

RHD  
Enclosures  
cc: INFINITE SERVICES OF NAPLES, LLC

**FILED**  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT TO  
ARTICLES OF ORGANIZATION OF  
INFINITE SERVICES OF NAPLES, LLC  
A Florida Limited Liability Company


- FIRST: The Articles of Organization were filed on January 19, 2005.
- SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the Members and/or Manager of the limited liability company by Consent dated February 4, 2005:

**Article IV**

**The name and Florida street address of the Registered Agent and Office is as follows:**

**JAMES R. NICI  
C/O COX & NICI  
1185 IMMOKALEE ROAD, SUITE 110  
NAPLES, FLORIDA 34110**

Having been named as Registered Agent and to accept service of process for the above stated limited liability company at the place designated in this amendment, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provision so fall statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

  
\_\_\_\_\_  
James R. Nici

**Article V**

**The name and address of the Manager is:**

**Title: MGR  
SAM CHIDO  
1021 3<sup>RD</sup> STREET SOUTH  
SUITE 204  
NAPLES, FLORIDA 34102**


**The name and address of the Officers of the Company are:**


**Title: President  
MATT DURIAN  
1021 3<sup>RD</sup> STREET SOUTH  
SUITE 204  
NAPLES, FLORIDA 34102**

**Title: Secretary  
SAM CHIDO  
1021 3<sup>RD</sup> STREET SOUTH  
SUITE 204  
NAPLES, FLORIDA 34102**

**Title: Treasurer  
SAM CHIDO  
1021 3<sup>RD</sup> STREET SOUTH  
SUITE 204  
NAPLES, FLORIDA 34102**

Dated: February 4, 2005

  
\_\_\_\_\_  
Sam Chiodo, Member

  
\_\_\_\_\_  
Matt Durian, Member

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA

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