## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H14000114721 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN IPB DEVELOPMENT, LLC

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5/14/2014

N. Outligen MAY 1.6 2014

## **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT:

IPB Development, 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:

**Attorney Walter Gangl** 

Name of Person

Gangl Law Office

Firm/Company

7 King Caesar Lane, Suite 200

Addres

Duxbury, MA 02332

City/State and Zip Code

wtg24@Cornell.edu

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Walter Gangl

Name of Person

**",717、299-2978** 

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 850-817-6381

5/15/2014 7:53:02 AM PAGE 1/001 Fax Server



May 15, 2014

0 T T

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT

SUBJECT: IPB DEVELOPMENT, LLC

REF: L05000010322

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

List the complete name of the Registered Agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II FAX Aud. #: H14000114721 Letter Number: 514A00010430

RECEIVED
4 MAY 15 AM 11: 07
SECRETARY OF STATE
ALLAHASSEE, RICHIDA

THE SIEMS

P.O BOX 6327 - Tallahassee, Florida 32314

2014 MAY 14 PM 2: 54

SECHLITARY OF STATE TALLAHASSEE, FLORIDA

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

IPB	Developme	nt, LLC		
(Name of the Limited	Liability Company Florida Limited L	y as it now appears on our lability Company)	( TECOTTS.)	
The Articles of Organization for this Limited Link	ility Company	were filed on Februa	ry 1, 2005 and assigned	
Plorida document number L05000010322				
This amendment is submitted to amend the follow	ving:	•	•	
A. If amending name, enter the new name of t	he limited liabi	lity company here:		
N/A		•		
The new name must be distinguishable and end with the wo	ords "Limited Liebi	lity Company," the designs	don "LLC" or the abbreviation "LLC."	
Enter new principal offices address, if applicab	ole:	7 King Caesar La	one, Suite 201	
Principal office address MUST BE A STREET	ADDRESS)	attn: Gangl Law (	Office	
		Duxbury, MA 023	32	
Enter new mailing address, if applicable:		7 King Caesar La	ane, Suite 201	
(Mailing address MAY BE A POST OFFICE B	030	attn: Gangi Law Office		
	<del></del>	Duxbury, MA 023	332	
B. If amending the registered agent and/or registered agent and/or the new registered offi	r registered of ce address bere	Ne address on our . :	records, enter the name of the new	
Name of New Registered Agent:	Icard Merril	Cullis Timm Fure	n & Ginsburg, P. A.	
New Registered Office Address:	2033 Main	Street, Suite 600		
		Enter Florida zorest address		
	Sarasota		, Florida 34237	
·		City	Zip Code	
New Registered Agent's Structure, if changing Re-	gistered Agent:			
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this cl	and complete ered agent as p gistered office	performance of my du provided for in Chapte	ities, and I am familiar with and or 605, F.S. Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent
Page 1 of 3 Charles Bartlett

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	IPB Dovelopment Liquidating Manager LLC	7 King Caesar Lane, Suite 201, Duxbury, MA 02332	_₩ Add
			Remove
MGR	IPB Manager, LLC	6150 TAMIAMI TRAIL N SUITE 300 NAPLES, FL 34103	Add
		REMOVE	_= Remove
MGR	T Chadwick "Chad" Lund		
		REMOVE	_# Remove
MGR	John B "Jack" Slory		_□ Add -
		REMOVE	_■ Remove
			<b>-</b> _□ Add
			_□ Remove
			_ _
			_ Remove
			_

reflect that the new Manager of						
IPB Development, LLC is "IPB Development Liquidating						
Manager LLC" a Delaware limited liability company.						
E: May 14, 2014 (optional) to of receipt or filed date and cannot be more than 90 days after						
2014						
member or authorized representative of a member or LLC by: Walter Gangi, Pres. of Betrug Resolution Corp., Manager Typed or printed name of signer						

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Filing Fee: \$25.00

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MAY 14 PH 2: 54

SECRETARY OF STATE
TAIL AHASSEE, FLORIDA