## L05000016701

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800058575548

08/31/05--01023--005 \*\*25.00

05 AUG 31 PM 2: 33

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

## TRANSMITTAL LETTER

	istration Section ision of Corpora					
SUBJECT:	INNOVEST P	ROPERTIES, LLC				
			mited Liability	Company)		
The enclosed	Articles of Ame	endment and fee(s) are sub	omitted for fili	ng.		
Please return	all corresponde	nce concerning this matter	to the follow	ing:		
	MAU	REEN AUGHTON				
		1)	Vame of Person	)		
	KRUCHTE	N LAW FIRM, LLC				
		(I	Firm/Company)			
!	975 6TH AVE.,	S. SUITE 200				·
-			(Address)			<del></del>
	NAPLES	S, FLORIDA 34105				
		(City/	State and Zip C	ode)		
For further in	formation conce	erning this matter, please c	all:			
MAUREEN AUGHTON			at ( <sup>2</sup>	239	775-8962	
	(N	ame of Person)		(Area Code	& Daytime T	elephone Number)
Enclosed is a c	heck for the follo	wing amount:				
□ \$25.00 Filir	ng Fee 🗆	\$30.00 Filing Fee & Certificate of Status	Certifie	Filing Fee & ed Copy onal copy is er	nclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u></u>	INNOVEST PROPERTIES, LLC						
	(Present Name) (A Florida Limited Liability Company)						
FIRST:	The Articles of Organization were filed on 02/17/2005 and assigned document number L05000016701	,					
SECOND:	The following amendment(s) to the Articles of Organization was/were adopted by the liability company:	limit	ed				
	To remove SPIELVOGEL, MICHAEL R., as a manager member of the LLC.						
		0	011				
		05 AUG 31 PM 2: 33	SECRETARY OF THE PROPERTY OF T				
		<u>ω</u>	25.5 25.5 25.5 25.5 25.5 25.5 25.5 25.5				
		PH 2:	OF STATE RPORATIONS				
		ယ	TIONS				
Dated AUG	GUST 24, 2005						
	Signature of a member or authorized representative of a member		<del>-</del> -				
	CATHERINE O. TINDELL, MANAGING MEMBER  Typed or printed name of signee						
	Typed or printed fiame of signee						

Filing Fee: \$25.00