

106000049858

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

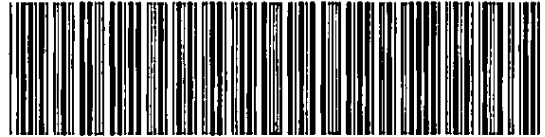
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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NIC & Amend

02/18/22--01028--002 **55.00

2022 FEB 18 AM 9:50
CLERK OF COURT
CLERK OF COURT
CLERK OF COURT

FILED

A. RAMSEY
FEB 25 2022

12525 New Brittany Blvd, Bldg #30
Ft. Myers, FL 33907
239-333-0490
239-333-0497 FAX



Bonita Springs, Florida
By Appointment Only
239-333-0490

February 17, 2022

Letter of Instruction
Process the Limited Liability Company Dissolution form 1st

Explanation: Our office registered and purchased the name of Independent Investment Advisors, LLC on 1/26/2021. At that time our intent was to dissolve our current LLC titled One Tier, LLC. One Tier, LLC was established on 05/05/2006 and the document number is L06000049858.

After the registering of Independent Investment Advisors with the state and starting the process to set up the LLC. We realize the more efficient approach would be to change the name of the LLC from One Tier, LLC to Independent Investment Advisors, LLC. This is because One Tier has been established since 2006 and the paperwork and tax reporting will be much simpler than start over with a new LLC.

Since Dianne Odom is the primary member of both LLC's. We thought it would be beneficial to send in the requests together to avoid a misstep.

Letter of Instruction
Process the Articles of Organization of a Limited Liability Company 2nd

As previously stated above, we want to change the name of One Tier, LLC to Independent Investment Advisors. This is because of accounting, retirement plans and IRS filing currently in place with One Tier. The process will be easier by doing a name change only.

If you have any questions about this request, please contact me at 239-333-0490 or by email at juliebrunswick@ssladvisors.net

Thank you,

A handwritten signature in black ink, appearing to read 'Julie Brunswick', is written over a horizontal line.

Julie Brunswick
Operations Manager

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: One Tier, 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:

Dianne Odom
Name of Person
Schlager Schlager & Levin
Firm/Company
12525 New Brittany Blvd Bldg. 30
Address
Ft. Myers, FL 33907
City/State and Zip Code
accounting@ssladvisors.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Julie Brunswick at (239) 333-0490
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2022 FEB 18 AM 9:50

One Tier, 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 05/05/2006 and assigned
Florida document number L06000049858.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Independent Investment Advisors, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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 office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Julie Brunswick	12525 New Brittany Blvd Bldg. #30 Ft. Myers, FL 33907	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) this data will not be listed as the

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00