L06000080027

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
, PICK-UP WAIT MAIL
t .
(Business Entity Name)
(Document Number)
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SELABBAGG OF STATE
ALLAHASSEE FI ORION

B. BOSTICK
MAR 16 2011
EXAMINER

COVER LETTER

TO:	Registration S Division of Co			
SUBJE	ECT:	Inn	ovize, lic	
		Name of Limit	led Liability Company	
		f Amendment and fee(s) are sub condence concerning this matter	-	
	•	Ü	-	
			Dan Ploger	
			Name of Person	
			Boooku,llc	
		4690	00 Bermont Road, #254	
		TAY 1		
		Pı	unta Gorda, FL 33982	11 MAR 14 ALLAHASS
	City/State and Zip Code			
			dan@ploger.net	F-11
		E-mail address: (to	be used for future annual report notification)	T TO
For fur	ther information	concerning this matter, please ca	all:	PN 1:28 PN 1:28 EFFLORIO
		Dan Ploger	at (941) 349-2075	D
	Name	of Person	Area Code & Daytime Telephone N	umber
	ed is a check for .00 Filing Fee	the following amount:		00 Filing Fee,
		Certificate of Status	(additional copy is enclosed) Cer	tificate of Status & tified Copy ditional copy is enclosed)
	Regist	LING ADDRESS: tration Section	STREET/COURIER ADDRESS Registration Section	SS:
Division of Corporations			Division of Corporations	

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

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Innoviz	ze, Ilc				
(Name of the Limited Liabi (A Florid	ility Compai da Limited L	ny as it now appeal liability Company)	rs on our records.)			
The Articles of Organization for this Limited Liability Company were filed on				and assigned		
Florida document numberL06000080027						
This amendment is submitted to amend the following	; :					
A. If amending name, enter the new name of the l	imited liab	ility company her	<u>·e</u> :			
	Boooku,	LLC				
The new name must be distinguishable and end with the "L.L.C."	words "Limi	ted Liability Compa	any," the designation	ı "LLC"	or the	abbreviatio
Enter new principal offices address, if applicable:						
(Principal office address MUST BE A STREET AD	DRESS)	no change		<u> </u>		
			 			
				ΞĘ	Æ	
Enter new mailing address, if applicable:				SS	<u></u>	Lacronia C
(Mailing address MAY BE A POST OFFICE BOX)	ŀ	no change		Lui C'	<u>Li</u>	1 1
	•					
					2	
B. If amending the registered agent and/or reg	gistered of	fice address on o	our records, <u>ente</u>	r the r	co name (of the nev
registered agent and/or the new registered office a	ddress here	<u>e</u> :				
Name of New Registered Agent: no	change		···		· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address: no	change	·	-1	· · · · · · · · · · · · · · · · · · ·		
		En	ter Florida street d	ıddress		
			, Florida			
		City		Z	ip Cod	le

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 608, 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

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

MGR = M MGRM =	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
	no change		Add Remove
	·		Add Remove
			☐ Add ☐ Remove
			Add
			Add T
			PATE Add Remove
	nding any other information, /a	enter change(s) here: (Attach additional sheets, if	necessary.)
Dated	March 08	2011	
	Signature	e of a member or authorized representative of a member	
		Dan Ploger, mgrm Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00