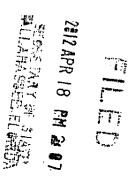
L07000/16683

| (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: | | | | | | |
| A. LUNT | | | | | | |
| APR 19 2011 | | | | | | |
| EXAMINER | | | | | | |
| | | | | | | |

Office Use Only

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COVER LETTER

TO:

| TO: | Registration S Division of Co | | | • | | |
|--|----------------------------------|---|---|-------------------------------|-----------------|--------------------|
| SUBJE | ECT: | IHA I | Finance, LLC | | | |
| ~ | | | ited Liability Company | - | | |
| The en | closed Articles of | f Amendment and fee(s) are su | bmitted for filing. | | | |
| Please | return all corresp | ondence concerning this matte | r to the following: | | | |
| | Laura Weiland | | | | _ | |
| | | | Name of Person | | | |
| East Coast Ice | | | East Coast Ice, LLC | | 2.0 | g E |
| | | | Firm/Company | | ZEIZ APR | , |
| | 13361 Atlantic Boulevard | | | | | |
| | | | Address | | 18 M | 7 |
| | Jacksonville, Florida 32225 | | | | | 1 |
| | | | City/State and Zip Code | | | ⁸ 18444 |
| | | Brenda.M | larch@IceHouseAmerica.co | om | ₩ T | |
| For furt | ther information of | concerning this matter, please | • | ication) | | |
| | Kathle | en Wubker, Esq. | at (904) | 704-4022 | | |
| | Name o | of Person | Area Code & Daytim | e Telephone Numbe | er | |
| Enclose | ed is a check for t | he following amount: | | | | |
| \$25. | .00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is enclosed | l) Certifie | ate of Status & | osed) |
| MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | ration Section on of Corporations ox 6327 | STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32 | on rations enter Circle | | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| IHA FIR | nance, LLC | | | |
|---|---|--|------------------------------------|--|
| (Name of the Limited Liability Con (A Florida Limit | npany as it now appears ed Liability Company) | on our records.) | | |
| (| = ino, company, | | | |
| The Articles of Organization for this Limited Liability Comp | any were filed on | 11/19/2007 | and assigned | |
| Florida document numberL07000116683 | | | <u>-</u> | |
| | | | | |
| This amendment is submitted to amend the following: | | | | |
| A. If amending name, enter the new name of the limited l | liability company here: | | | |
| | | | | |
| The new name must be distinguishable and end with the words "L.L.C." | imited Liability Company | y," the designation "LL | C" or the abbreviation | |
| Enter new principal offices address, if applicable: | | | 379 | |
| (Principal office address MUST BE A STREET ADDRESS |) | | | |
| | | | - | |
| | · - · · · | | | |
| Forton 11 | | | 00 /- | |
| Enter new mailing address, if applicable: | | | 2 11 | |
| (Mailing address MAY BE A POST OFFICE BOX) | | | <u> </u> | |
| | | | • | |
| | | | | |
| B. If amending the registered agent and/or registered registered agent and/or the new registered office address l | | r records, enter the | name of the new | |
| | | | | |
| Name of New Registered Agent: | | | | |
| | | | | |
| New Registered Office Address: | Enta | . Florida atrost addus | | |
| | Enter Florida street address | | | |
| | City | , Florida | Zip Code | |
| N. D. L. M. G. | City | | Zip Coae | |
| New Registered Agent's Signature, if changing Registered Age | ent: | | | |
| I hereby accept the appointment as registered agent and of the provisions of all statutes relative to the proper and co- accept the obligations of my position as registered agent of being filed to merely reflect a change in the registered off company has been notified in writing of this change. | mplete performance of as provided for in Cha | my duties, and I am pter 608, F.S. Or, if | familiar with and this document is | |

Page 1 of 2

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 = Manager

MGRM = Managing Member

<u>Title</u> <u>Name</u> **Address Type of Action** MGR Peter E. Cotter 13361Atlantic Boulevard ☐ Add Jacksonville, Florida 32225 √ Remove MGR Brenda March 13361 Atlantic Boulevard Jacksonville, Florida 32225 Remove Twice the Ice Holdings, LL MGR c/o Ulysses Management ✓ Add One Rockefeller Plaza, 20th Floor ☐ Remove New York, New York 10020 Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Paul D. Barnett, President, Twice the Ice Holdings, LLC Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00