#107000116683

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

Office Use Only



800242230938

12/03/12--01035--009 **30.00

PICOLO ANT & STATE

K.SALY EXAMINER DEC - 4 2012

COVER LETTER

TO: Registration Section
Division of Corporations

111A Finance 11.C

SUBJECT: IHA Finance, 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:

Brenda March, CFO

Name of Person

Ice House America, LLC

Firm/Company

1597 The Greens Way

Address

Jacksonville Beach, FL 32250

City/State and Zip Code

Brenda.March@icehouseamerica.com

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

For further information concerning this matter, please call:

Kathleen Wubker

___904**704-4022**

Name of Person

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED.

12 DEC -3 PM 3:51

IHA Finance, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Enter new mailing address, if applicable:	1597 The Greens Way			
	Jacksonville, Florida 32250			
Mailing address MAY BE A POST OFFICE BOX)	Jacksonville, Florida 32250			
				
egistered agent and/or the new registered office address her				
registered agent and/or the new registered office address her				
egistered agent and/or the new registered office address her Name of New Registered Agent:	<u>·e</u> :			
egistered agent and/or the new registered office address her	· <u>e</u> :			
	<u>·e</u> :			

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 = Mana MGRM = Ma	nger nnaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			
			Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
·			Add
			Remove

D . 1	lf am	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)						
			•		· . ,			
		-						
Date	ed	NOVEMBI	FR 25	<u></u>	2012.			
,					7			
			S	signature of a me	mber or autho	rized representati	ve of a member	
		Pete	r E. Cotte	er, Preside	nt, Twice	the Ice Ho	oldings, LLC,	Manager
				7	ped or printe	d name of signee		

Page 3 of 3

Filing Fee: \$25.00