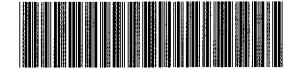
# L 67000123993

(Requestor's Name)
(Address)
( tauress)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
25.71
Office Use Only



100120775241

03/24/08--01041--012 \*\*30.00

08 MAR 2L PM 3: 15

T. HAMPTON

MAR 2 5 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Innovative Concepts of Volusia, LCC (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:
(Name of Person)
Innovative Concepts of Volusia
1417 N. Hali Fax Ave.
Daytona Beach, FL 32118 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (386) 254-2712  (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \times \text{\$30.00 Filing Fee & }\ \text{Certificate of Status} \text{\$\text{Certified Copy (additional copy is enclosed)}} \text{\$\text{\$\text{Certified Copy (additional copy is enclosed)}}} \text{\$\text{\$\text{\$\text{Certified Copy (additional copy is enclosed)}}} \$\text{\$

**MAILING ADDRESS:** 

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

### STREET/COURIER ADDRESS:

(additional copy is enclosed)

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Innovative Concepts of Volusia, 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 Lia	bility Company were filed on $\frac{12/13/2}{}$	007 and assigned	
Florida document number L07000123	3 9 9 3.	81.4F	
- · · · · · · · · · · · · · · · · · · ·		ECRETISION O	
This amendment is submitted to amend the follow	wing:	14 PER	
		PH	
A. If amending name, enter the new name of	the limited liability company here:	<b>3</b> .	
		<b></b>	
"L.L.C."  B. If amending the registered agent and/or registered agent and/or the new registered offi	r registered office address on our records, <u>ente</u> ice address here:	r the name of the ne	
Name of New Registered Agent:	Cynthia L. Rober	£8	
New Registered Office Address:	320 N. IZTH Stree	+	
	(Enter Florida street address)		
	Flagler Beach, Florida	32(36 (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 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 = Manager MGRM = Managing Member					
<u>Title</u>	Name	Address	Type of Action		
MGRM	Cynthia L Roberts	320 N. 12+H Strept Flagler-Beach, FL 32136	Add Remove		
<del></del>			Add Remove		
			Add Remove		
	-1		Add Remove		
	<del></del>		Add Remove		
			Add Remove		
D. If amend	March 20th, 2008	here: (Attach additional sheets, if necessary.)	FILED STATE SECRETARY OF STATE DIVISION OF CORPORATIONS 08 MAR 24 PH 3: 15		
	Kristi	authorized representative of a member printed name of signee			

Page 2 of 2

Filing Fee: \$25.00