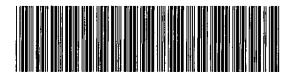
## 0800002695

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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DIVISION OF CORPORATIONS

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J. BRYAN

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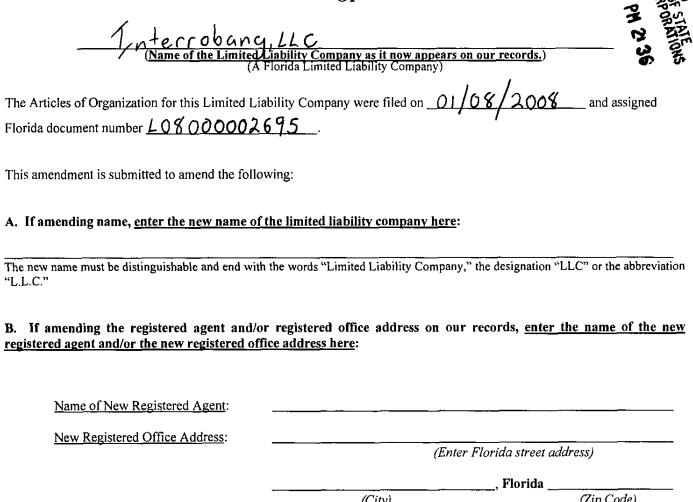
**EXAMINER** 

## **COVER LETTER**

Division of Corporations		
SUBJECT: Interrobang, LLC (Name of Limit		
(Name of Limit	ted Liability Company)	
The enclosed Articles of Amendment and fee(s) are subn	nitted for filing	
Please return all correspondence concerning this matter to		
Troube retain an ecrosponative concerning and maner.	o	
Jovanni Bell	(Name of Person)	
Interrobang, L		08.JP
12743 SW 2	•	SECRETARY OF STATION OF CORPORATION
Miami, Fl.	33170 (City/State and Zip Code)	STATIONS ORATIONS
For further information concerning this matter, please cal	II:	
Jovanni Bello (Name of Person)	at (305 ) 300 - 902 (Area Code & Daytime To	elephone Number)
Enclosed is a check for the following amount:		
\$25.00 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	STREET/COURIER Registration Section Division of Corporatio	

P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



## 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

<u>tle</u>	<u>Name</u>	Address	Type of Action
<u> </u>	Ross Nover	4500 Connecticut Ave, washington, DC 20008	Apt 206 Add Remove
<del></del> .			Add Remove
			Add Remove
	<del></del>		Add Remove
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		change(s) here: (Attach additional sheets, if necesed los title to Managiny Menticles title to Managiny Menticles title to Managiny Menticles	nber 08 JAN 18
ated_ J	anvary 16	2008	PH 2: 36
	Signature of a n	nember or authorized representative of a member  Tovanni Bello Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00