

L08000057925

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

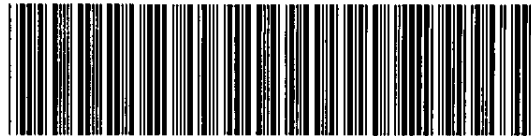
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2012 SEP 19 AM 9:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. SAULSBERRY  
EXAMINER

SEP 20 2012

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Intelligence Business 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:

David Sebastian Cevallos-Flor  
Name of Person

Intelligence Business LLC  
Firm/Company

17861 NW 19<sup>th</sup> ST  
Address

Pembroke Pines, FL 33029  
City/State and Zip Code

sebas.cevallos@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sebastian Cevallos at (305) 407-2933  
Name of Person Area Code & Daytime Telephone Number

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TALLAHASSEE, FLORIDA

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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

Intelligence Business 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 Liability Company were filed on 06/12/2008 and assigned Florida document number L08000057925

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

N/A

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

17861 NW 19<sup>th</sup>  
Pembroke Pines, FL 33029

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

17861 NW 19<sup>th</sup> ST  
Pembroke Pines FL 33029

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

David Sebastian Cevallos

New Registered Office Address:

17861 NW 19<sup>th</sup> ST

Enter Florida street address

Pembroke Pines, Florida 33029  
City 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.

David Sebastian Cevallos  
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>	<u>Address</u>	<u>Type of Action</u>
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MGRM	Smartsystems S.A	1620 NW 82nd Ave MIAMI FL 33126	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
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MGRM	Sharpcenter	17861 NW 19th St Pembroke Pines FL 33029	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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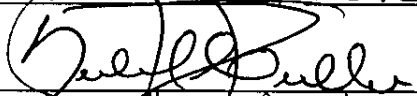
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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2012 SEP 19 AM 9:02  
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TALLAHASSEE, FLORIDA

Dated September 14, 2012



Signature of a member or authorized representative of a member

Typed or printed name of signee