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SECRETARY OF STATE
SECRETARY OF STATE

D. BRUCE

FEB 2 2009

EXAMINER

COVER LETTER

SUBJECT: Informati		•						
The enclosed Articles of A	mendment and fee(s) are subr	nitted for filing.						
Please return all correspond	dence concerning this matter t	to the following:						
	Jeff Stealey							
		(Name of Person)						
	Information Centers International LLC							
	(Firm/Company)							
	1100 6th Ave South #10							
(Address)								
	Naples, Florida 34102		ECH LLA	ر آ	الله الله الله			
		(City/State and Zip Code)	HA	FIL JAN 30	•			
For further information con	ncerning this matter, please ca	all:	SSEE. FI	黑皿				
Jeff Stealey		at (239) 404-0480	STA LOR	# O				
(Name of Person) (Area Code & Day			elephone Himter)	1				
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)	Certified (of Status &	sed)			

Registration Section Division of Corporations

TO:

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

Information Centers Inte	rnational LL	C y as it now appears on our re	cords.)	
(A	Florida Limited Li	y as it now appears on our reability Company)	 ,	
The Articles of Organization for this Limited Lia	ability Company v	were filed on 8/27/2008	and assigned	Ŀ
Florida document number 1.08000081836	·₽			
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liabil	ity company here:		
The new name must be distinguishable and end with	the words "Limite	ed Liability Company," the des	signation "LLC" or the abbre	<u></u> viation
"L.L.C."			09 SEC	
Enter new principal offices address, if applica	ıble:		APP A	
(Principal office address MUST BE A STREET ADDRESS)			<u>3</u>	
Enter new mailing address, if applicable:		1100 6th Ave South #10	STAIL STAIL	
(Mailing address MAY BE A POST OFFICE BOX)		Naples, Florida 34102	DM &	
B. If amending the registered agent and/or registered agent and/or the new registered off	r registered offi ice address here Jeff Stealey	ce address on our record	s, <u>enter the name of the</u>	e new
Name of New Registered Agent:	, 			
New Registered Office Address: 1100 6th			a atuant addressa)	
		·	a street address)	
	Naples	, F	Gorida 34102 (Zip Code)	
New Registered Agent's Signature, if changing R	legistered Agent:	(,-,-	(2.7 000)	
I hereby accept the appointment as registered the provisions of all statutes relative to the praccept the obligations of my position as registering filed to merely reflect a change in the recompany has been notified in writing of this company has been notified.	d agent and agre roper and comple stered agent as p registered office of change.	e to act in this capacity. If ete performance of my duti rovided for in Chapter 608 address I hereby confined t aging Registered Agent, Sknatu	es and I am familiar will F.S. Or, if this documen hat the limited liability	rith 'r and et is
	Daga 1	of 2/ (/ U		

Page 1 of 2

lf 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	Suzanne Murphy	6171 Ashwood LN Naples, FL 34110	Add Remove
			Add Remove
			Remove
			Add Remove
			P D ALIA
			Add Remove
D. If ame	ending any other information, enter o	change(s) here: (Attach additional sheets, if	neessary AN 3
-			PH 4: 14 YOF STATE FLORIDA
~			A constant
Dated	1-27-09		
		nember or authorized representative of a membe	r
	Jeff Stealey	Typed or printed name of signee	

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Filing Fee: \$25.00