· LD900004559

(Re	questor's Name)	
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PICK-UP	MAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	of Status
	Certificates	U. C.G.G.S

Special Instructions to Filing Officer:

L. SELLERS

MAY - 1 2009

EXAMINER

Office Use Only



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SEORETARY OF STATE

TILIU

COVER LETTER

Division of Corporations							
SUBJECT: IBARS VENTURES LLC							
(Name of Limited Liability Company)							
(Name of Emilion English)							
The enclosed Articles of Amendment and fee(s) are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
Tony Burroughs							
(Name of Person)							
Legalzoom.com, Inc. (Firm/Company)							
(i iiii company)							
7083 Hollywood Blvd., Suite 180							
(Address)							
Les Angeles CA 00029							
Los Angeles, CA 90028 (City/State and Zip Code)							
For further information concerning this matter, please call:							
Tony Burroughs at (323) 962-8600 (Name of Person) (Area Code & Daytime Telephone Number)							
(Name of Person) (Area Code & Daytime Telephone Number)							
Enclosed is a check for the following amount:							
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee,							
Certificate of Status Certified Copy Certificate of Status & Cadditional copy is enclosed) Certified Copy							
(additional copy is enclosed)	sed)						

· . TO: Registration Section

> 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

IBARS VENTURES LLC				
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears of Limited Liability Company)	<u>in our records.</u>)		
· ·	, , , , , ,			
The Articles of Organization for this Limited Liability	Company were filed on <u>01/14</u>	/2009	and assign	ned
Florida document number <u>L0900004559</u>				
				
This amendment is submitted to amend the following:				
This uncliding it is submitted to affected the following.				
A 16	-!4- 4 1!-L!!!4			
A. If amending name, enter the new name of the lin	nited Hability company nere:			
X Squared Marketing Group, LLC				
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Company	," the designation "L	LC" or the abb	reviatio
The Team of the Land August 1				
B. If amending the registered agent and/or registered agent and/or the new registered office add		records, enter th	ie name oi i	ine nev
•				
Name of New Registered Agent:				
N B '4 1000 A11				
New Registered Office Address:	(Fnto	r Florida street add	lrace)	
	(Lime	r i wriaa sireei aaa	09 SE SE	
		, Florida		
	(City)		Trp Code)	<u> </u>
			30 (SS	
New Registered Agent's Signature, if changing Register	ed Agent:			Ш
Therefore was a state of the st	. T	. T.C. J	F (/) ~	D
I hereby accept the appointment as registered agent the provisions of all statutes relative to the proper a				
accept the obligations of my position as registered o	agent as provided for in Chaj	oter 608, F.S. Or. i	if this docum	un ana ent is
being filed to merely reflect a change in the register	ed office address, I hereby c	onfirm that the lim	, ited liability	
company has been notified in writing of this change				
	(If Changing Registered Agent	, Signature of New Re	gistered 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>	Address	Type of Action		
			Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
D. If a	nending any other information, enter change(s) here: (Attach additional sheets, if necessary,)		
	Article II. The street address of the pri				
	the Limited Liability Company shall be:	:	SECRE		
	15266 SW 35th St. Davie, FL 33331	——————————————————————————————————————	爱 3		
			AN 8: 52		
Dated _	April 23, 2009	·	S2 RIDA		
	Signature of a member of	r authorized representative of a member			
	Oscar Ibars, Member	•			
	Typed or	nrinted name of signee			

Page 2 of 2

Filing Fee: \$25.00