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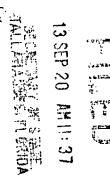
•		
(Re	questor's Name)	
(Ad	dress)	<u> </u>
(Ad	dress)	
(Cit	ry/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

Registration Section TO: **Division of Corporations**

Input Ladder 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:

Matthew Hall

Name of Person

Input Ladder LLC

Firm/Company

PO Box 267073

Address

Ft. Lauderdale, FL 33326

City/State and Zip Code

matthew@inputladder.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matthew Hall

at (954)667-9675

Area Code & Daytime Telephone Number

Name of Person

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 Capy

(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

Input Ladder LLC							
(<u>Name of the Limited</u> (A	Liability Compar Florida Limited L	ny as it now appear Liability Company)	s on our records.)				
The Articles of Organization for this Limited Liability Company were filed on 3/19/2009 and assigned Florida document number L09000026757						med	
This amendment is submitted to amend the following	owing:						
A. If amending name, enter the new name of	the limited liab	ility company her	<u>e</u> :				
N/A							
The new name must be distinguishable and end wit "L.L.C."	h the words "Limi	ted Liability Compa	ny," the designation	n "LLC" or	the ab	breviatio	
Enter new principal offices address, if applicable:		1451 West Cypress Creek Road					
(Principal office address MUST BE A STREET ADDRESS)		Suite 300					
		Ft. Lauderd	ale, FL 3330	19	 		
Enter new mailing address, if applicable:		1451 West	Cypress Cre	ek Roa	ıd		
(Mailing address MAY BE A POST OFFICE BOX)		Suite			ربي.	**************************************	
		Ft. Lauderd	ale, FL 3330	19	1.0	्व है सन्दर्भक्षा	
B. If amending the registered agent and/o			our records, <u>ent</u> e	er the na	_		
registered agent and/or the new registered of	fice address her	<u>e</u> :		1 - C - 2	=	increasing A property	
Name of New Registered Agent:	Matthew 0	C. Hall		D.Fi	: 37		
New Registered Office Address:	New Registered Office Address: 1451 West Cypress Creek Road, Suite 300						
	Enter Florida street address						
	Ft. Lauder	rdale	, Florida	orida 33309			
		City			Code		
37 73 1 . 1							

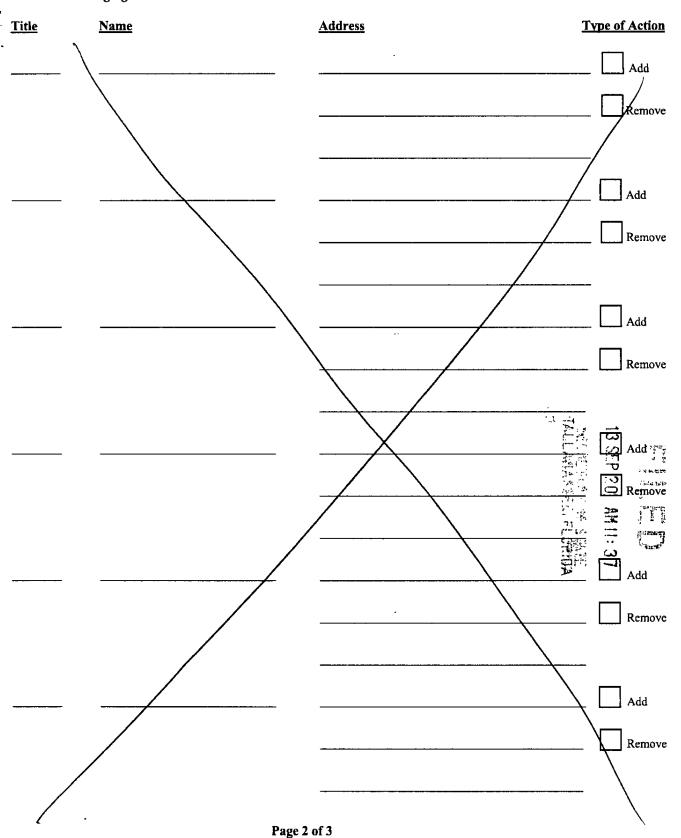
New Registered Agent's Signature, if changing Registered Agent:

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



	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<u> </u>	-tb42 2042
Dated Se	otember 13 2013
	Signature of a member or authorized representative of a member
	Matthew Hall
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

13 SEP 20 AM II: 37