

LD9000035203

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

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

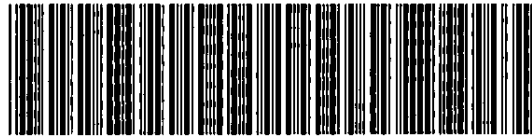
Special Instructions to Filing Officer:

**L. SELLERS**

**MAY 19 2009**

**EXAMINER**

Office Use Only



400155926584

05/18/09--01013--017 \*\*30.00

**FILED**  
**09 MAY 18 AM 8:24**  
**SECRETARY OF STATE**  
**TALLAHASSEE FLORIDA**

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Angelic View By J.T.  
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:

Ixsa M Torres, CCAC  
Name of Person

Infinity Clinical Trials Consulting  
Firm/Company

Alameda  
100 Alameda Way # 109  
Address

Palm Beach Gardens, FL 33410  
City/State and Zip Code

Ixsa.JT@infinity.ctc.consulting.com  
E-mail address: (to be used for future annual report notification)  
5-3-09

For further information concerning this matter, please call:

Ixsa M Torres, CCAC at (305) 225-9389  
Name of Person Area Code & Daytime Telephone Number

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**

Angelic View By J.J., 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 4-13-09 and assigned  
Florida document number L09000035203

This amendment is submitted to amend the following:

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

Infinity Clinical Trials Consulting and Marketing, LLC  
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)

N/A

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

**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:

N/A

New Registered Office Address:

N/A  
Enter Florida street address

N/A  
City

**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.

N/A  
If Changing Registered Agent, Signature of New Registered Agent

FILED  
09 MAY 18 AM 8:11  
TALLAHASSEE  
FLORIDA  
SECRETARY OF STATE

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

Title	Name	Address	Type of Action
MGR	LUICILA TORRES	2562 GARDENS PARK WAY PALM BEACH GARDENS, FL 33410	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR/MGRM	IXSA M TORRES, owner	Alameda 100 Alameda WAY Suite 104 P.B.G., FL 33410	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	ESPERANZA GARCIA	100 Alameda WAY Suite 104 P.B.G., FL 33410	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove 5-7-09
MGRM	ESPERANZA GARCIA	Alameda 100 Alameda WAY Suite 104 P.B.G., FL 33410	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR/MGRM	IXSA M TORRES, CCRC owner	100 Alameda WAY Suite 104 Palm Beach Gardens 33410	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	ESPERANZA GARCIA	100 Alameda WAY Suite 104 Palm Beach Gardens, FL 33410	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

Dated \_\_\_\_\_

Signature of a member or authorized representative of a member

IXSA M TORRES, CCRC

Typed or printed name of signer

FILED  
09 MAY 18 AM 8:24  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA