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EXAMINER

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COVER LETTER

•	ation Section 1 of Corporations			
SUBJECT:	Managed Info	ormation Systems LLC		
•	Name of Lin	nited Liability Company	***************************************	
The enclosed Art	icles of Amendment and fee(s) are su	ubmitted for filing.		
Please return all	correspondence concerning this matte	er to the following:		
		Matthew Newby		
		Name of Person		
	Manag	ed Information Systems LLC		
Firm/Company				
10729 Tabor Drive				
		Address		
		Tampa, FL 33625		
		City/State and Zip Code		
	St E-mail address:	<pre>upport@tampamis.com (to be used for future annual report notifica</pre>	ation)	
For further inform	nation concerning this matter, please			
	Matthew Newby	at (813) 69	99-9735	
	Name of Person	Area Code & Daytime T	Celephone Number	
Enclosed is a che	ck for the following amount:			
₹ 25.00 Filing	Fee \$\int_\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

Manag (Name of the Limited (A	ed Information System Liability Company as it now app Florida Limited Liability Company	ns LLC pears on our records.)	<u>. </u>
The Articles of Organization for this Limited Li Florida document numberL09000041	-	4/28/2009	and assigned
This amendment is submitted to amend the follow. A. If amending name, enter the new name of	•	<u>here</u> :	
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability Con	mpany," the designation "	'LLC" or the abbreviation
Enter new principal offices address, if application	able:		·
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and/oregistered agent and/or the new registered of	or registered office address o	on our records, <u>enter</u>	the name of the nev
Name of New Registered Agent:	Matthew Newby		SECOND TO
New Registered Office Address:	10729 Tabor Drive		ω ===
	Tampa City	Enter Florida street ad, Florida	33625
New Registered Agent's Signature, if changing R	•		The second

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 Resistered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Matthew C Newby	2456 Edgewater Falls Dr Brandon, FL 33511	Add Remove
MGRM	Matthew C Newby	10729 Tabor Drive Tampa, FL 33625	✓ Add ☐ Remove
			Add Remove
			Add Remove
·······			Add Remove
			Add Remove
D. If amend	ding any other information, en	ter change(s) here: (Attach additional sheets, if necessary.)	_
-			
Dated	August 26	, 2010 .	
	70		
	Signature o	f a member or authorized representative of a member	
		Matthew C Newby	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00