

W09000055072

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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 JUN 18 AM 11:49

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M. THOMAS  
JUN 19 2009  
EXAMINER

# ***Identity Protection Services LLC.***

*Professional Online Investigative Intelligence*®

**June 15, 2009**

**Florida Department Of State  
Division Of Corporations**

**Registration Secion  
Division Of Corporations  
P.O. Box 6327  
Tallahassee, Fl. 32314**

**Enclosed is a amendment to our LLC. I have attached the \$25.00 fee.**

**Richard Hagen  
12555 Orange Drive  
Suite 110  
Davie, Fl. 33330  
[rich@amerinfor.com](mailto:rich@amerinfor.com)**

**866-249-6434**

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TALLAHASSEE, FLORIDA

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Identity Protection Services, 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:

Richard Hagen

Name of Person

Identity Protection Services, LLC

Firm/Company

200 South Andrews Ave.

Address

Fort Lauderdale FL 33301

City/State and Zip Code

rich@amerinfor.com

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

For further information concerning this matter, please call:

Richard Hagen

at ( 866 )

249-6434

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

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**Identity Protection Services, 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 06/08/2009 and assigned  
Florida document number L09000055072.

This amendment is submitted to amend the following:

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

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)

12555 Orange Drive

Suite 110

Davie FL. 33330

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

12555 Orange Drive

Suite 110

Davie FL. 33330

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TALLAHASSEE, FLORIDA

**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:

New Registered Office Address:

Enter Florida street address

, Florida

City

Zip Code

**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

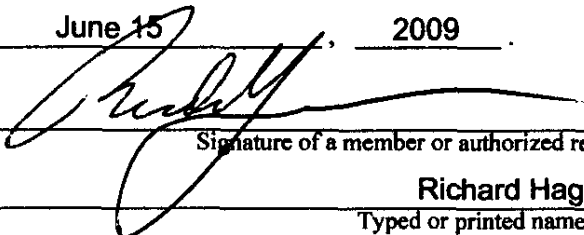
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>Richard Hagen</u>	<u>12555 Orange Drive</u> <u>Suite 110</u> <u>Davie FL 33330</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGRM</u>	<u>Nugehalli Gopal</u>	<u>12555 Orange Drive</u> <u>Suite 110</u> <u>Davie FL 33330</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGRM</u>	<u>Curtis Evans</u>	<u>12555 Orange Drive</u> <u>Suite 110</u> <u>Davie FL 33330</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGRM</u>	<u>Carrie Kerskie</u>	<u>12555 Orange Drive</u> <u>Suite 110</u> <u>Davie FL 33330</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGRM</u>	<u>Trevor I. Briede</u>	<u>12555 Orange Drive</u> <u>Suite 110</u> <u>Davie FL 33330</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGRM</u>	<u>Sanford Chevlin</u>	<u>12555 Orange Drive</u> <u>Suite 110</u> <u>Davie FL 33330</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated June 15, 2009

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Richard Hagen

\_\_\_\_\_  
Typed or printed name of signer

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