L09000063006

(Requestor's Name)				
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(City/State/Zip/Phone #)				
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Special Instructions to Filing Officer:				
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SECULIARY OF STATE

SEP 8 0 2010

COVER LETTER

TO: Registration : Division of Co					
SUBJECT:		ew Registered Agent	· .		
	Name of Lim	ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.			
Please return all corresp	pondence concerning this matte	r to the following:			
		Duane Rocke	,		
		Name of Person			
	Inf	inite Premier Marketing			
		Firm/Company		;	
349		3495 W. Vine Street		2010 SEC	•
		. Audiess	VHV.	AJS.	77
		Kissimmee, Fl. 34741 City/State and Zip Code		29	
	infinitepr	emiermarketing@yahoo.com	ion Si	AH III: I	
For further information	concerning this matter, please	·	ALCA ALCA ALCA ALCA ALCA ALCA ALCA ALCA	. 1	
Г	Duane Rocke	at (_407)8	83-5841 OK)	1100 -la ⁶	94-6143
	of Person	Area Code & Daytime T	elephone Number	<u> </u>	
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 Certificate of Certified Control (additional control)	of Status & opy	osed)
MAII	LING ADDRESS:	STREET/COURIE	R ADDRESS:		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Infinite (Name of the Limited Lia	Premier Marketing LLC bility Company as it now appears of the company as it now appears of the company)	n our records.)				
The Articles of Organization for this Limited Liabi Florida document number L090006300	lity Company were filed on		and assigned			
This amendment is submitted to amend the following	ng:					
A. If amending name, enter the new name of th	e limited liability company here:					
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company	" the designation "I	LC" or the abbreviation			
Enter new principal offices address, if applicabl	e:					
(Principal office address MUST BE A STREET ADDRESS)			22 22			
•		Ž	≥ <u>0</u> 8 — —			
		j t	2 2			
Enter new mailing address, if applicable:		Ē	9			
(Mailing address MAY BE A POST OFFICE BO	X)	- - 	70			
			82 = 1			
			₹			
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter t	he name of the new			
Name of New Registered Agent:	Joseph Gonzalez					
New Registered Office Address:	New Registered Office Address: 3495 W. Vine Street					
	Enter Florida street address					
_	Kissimmee	, Florida	34741			
	City		Zip Code			
New Registered Agent's Signature, if changing Reg	istered Agent:					
I hereby accept the appointment as registered a the provisions of all statutes relative to the pro- accept the obligations of my position as register being filed to merely reflect a change in the reg	oer and complete performance of red agent as provided for in Chap istered office address, I hereby c	my duties, and I opter 608, F.S. Or, on firm that the lin	am familiar with and if this document is			

If Changing Registered Agent, Signature of New Registered Agent
Page 1 of 2

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 = N	Managing Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, ente	er change(s) here: (Attach additional sheets, if necessor	
	· · · · · · · · · · · · · · · · · · ·		7010 SEP 29
Dated	9/15/2010		SEE. FLORIDATE D
• •	Signature of a	have Kokee a member or authorized representative of a member	A
		Duane Rocke Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00