

✓
L09000107970

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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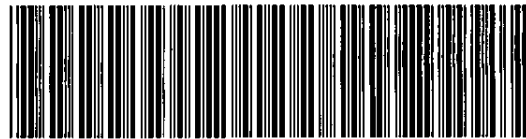
(Business Entity Name)

(Document Number)

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FILED
11 NOV 21 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK
NOV 22 2011
EXAMINER

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: International Strategic Solutions, 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:

Thomas Korte

Name of Person

International Strategic Solutions, LLC

Firm/Company

8625 Via Rapallo Drive #101

Address

Estero, FL 33928

City/State and Zip Code

tkortec21@aol.com

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

For further information concerning this matter, please call:

Thomas Korte

Name of Person

at (239) 896-3986

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

STATE
TALLAHASSEE
FLORIDA
11 NOV 21 PM 2:00
CORPORATION

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

International Strategic Solutions, 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 November 09, 2009 and assigned Florida document number L09000107970.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Thomas Korte

New Registered Office Address:

8625 Via Rapallo Drive #101

Enter Florida street address

Estero

City

, Florida

33928

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.

Thomas P. Korte
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:

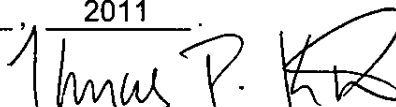
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Jawaun Blossomgame	507 Crimson Ridge Drive Jonesboro, GA 30238	☒ Add ☐ Remove
MGRM	Kevin Ofchus	360 Revenna Trail Fayetteville, GA 30214	☐ Add ☒ Remove
MGRM	Sonya Russell	507 Crimson Ridge Drive Jonesboro, GA 30238	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

Dated October 31, 2011



Signature of a member or authorized representative of a member

Thomas Korte

Typed or printed name of signee

RECEIVED
FLORIDA
11 NOV 21 PM 2:00
604 470