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(Requestor's Name)				
(Address)				
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EXAMINER SEP 26 2011

COVER LETTER

TO:	Registration Sect						
SUBJ	ECT:	INTERGROU	P GULF COAST LI	LC			
		Name of Lim	ited Liability Company	 			
The er	iclosed Articles of Ai	mendment and fee(s) are sul	omitted for filing.				
Please	return all correspond	lence concerning this matter	to the following:				
			Mark VanZorn	*			
			Name of Person	<u> </u>			
		INTER	GROUP GULF COAS	THC ·	•		
			Firm/Company				
		199	0 Main Street, Suite 7	50			
			Address				
			Sarasota, FL 34236				
			City/State and Zip Code				
		F-mail address:	vanzorn@gmail.com	ort notification)			
For further information concerning this matter, please call:							
		« VanZorn	at (941)	484-4555			
Name of Person		Area Code &	Daytime Telephone Number				
Enclos	ed is a check for the	following amount:					
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certified	te of Status &		
	Registration of P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, FL 32314	Registration Division of C Clifton Build	Corporations			

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

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SEVAN IANY OF STATE
FALLAHASSES

	RGROUP GULF COAST	LLC TALL	AHASSEE, FLORIDA
(<u>Name of the Limited</u> (A	Liability Company as it now appea Florida Limited Liability Company)	rs on our records.)	JAMII OF
The Articles of Organization for this Limited L Florida document number L10000018	iability Company were filed on		and assigned
	·		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liability company he	re:	
The new name must be distinguishable and end wit "L.L.C."	th the words "Limited Liability Comp	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	T ADDRESS)		
			<u> </u>
F-4			
Enter new mailing address, if applicable:	•		
(Mailing address MAY BE A POST OFFICE	<u> </u>		
B. If amending the registered agent and/		our records, enter t	he name of the new
registered agent and/or the new registered of	fice address here:		
Name of New Registered Agent:	·		
New Registered Office Address:			
	Er	nter Florida street addi	ess
		, 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>	Name	Address	Type of Action
MGRM	Danielle M. VanZorn	1990 Main Street, Suite 750 Sarasota, FL 34236	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
	·		Add Remove
D. If amend	ling any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	
			-
	September 19	2044	_ _
Dated		2011	-
		Mark A. VanZorn	
	·	Typed or printed name of signee	

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Filing Fee: \$25.00