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B. BOSTICK
JUL 17 2012

EXAMINER

COVER LETTER

TO:

Registration Section

Division of C	Corporations					
SUBJECT:	ldeal In	terest Group LLC				
		ited Liability Company				
The enclosed Articles	of Amendment and fee(s) are sul	omitted for filing.				
Please return all corre	spondence concerning this matter	r to the following:				
		Dale Robinson				
	Ide	eal Interest Group LLC				
		Firm/Company				
	2300	Tall Pines Dr Suite 125 Address				
		Address		5	<u>~</u>	
		Largo, FL 33771 City/State and Zip Code			ال	د ز
	di mail address.	robinson50@live.com to be used for future annual report not	(figation)	G C F	చ	
For further information	on concerning this matter, please of	·	meation		12 JUL 13 AHII:5	ί.
	Dale Robinson	at (727)	692-7295		:53	
Nan	ne of Person	Area Code & Daytii	me Telephone Number			
Enclosed is a check for	or the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filin Certificate ed) Certified ((additional	of Statu Copy		ed)
Reg Div P.O	ILING ADDRESS: gistration Section ision of Corporations . Box 6327 ahassee, FL 32314	STREET/COUR Registration Sect Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	orations Center Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ideal I	nterest Group LLC		
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appear Limited Liability Company)	rs on our records.)	
(**************************************	·,		
The Articles of Organization for this Limited Liability	Company were filed on	4/5/2010	and assigned
Florida document numberL10000036585	·		
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the lir</u>	mited liability company her	<u>e</u> :	
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Compa	iny," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	ORESS)		
			F 1.
Enter new mailing address, if applicable:			<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			P
			
			5 T
B. If amending the registered agent and/or regi		our records, <u>enter</u>	the name of the nev
registered agent and/or the new registered office ad	dress here:		,
Name of New Registered Agent:			
New Registered Office Address:			
•	Enter Florida street address		
		, Florida	
	City	,	Zin 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, <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_	David Arnold	200 Country Clud Dr apt 1107 Largo, fl 3377/	✓ Add Remove
			Add Remove
			Add Remove
			Add Remove
· · ·			Add Remove
			AddRemove
D. If amend	ding any other information, enter c	change(s) here: (Attach additional sheets, if necessa	ry.)
 -			12 JUL 1
_		ŗ	
Dated	July 9th	2012	H: 53
	Signature of a m	ember or authorized representative of a member	
		David Arnold Typed or printed name of signee	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00