

L100000045104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

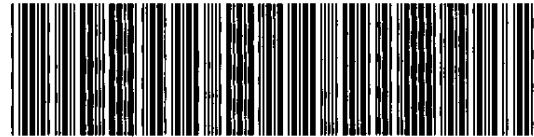
Special Instructions to Filing Officer:

**L. SELLERS**

JUL 28 2010

**EXAMINER**

Office Use Only



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07/22/10--01013--009 \*\*25.00

**FILED**  
10 JUL 22 PM 2:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Inner Circle Daytona, 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:

Julie Brian

Name of Person

Inner Circle

Firm/Company

600 N. Atlantic Ave

Address

Daytona Beach, FL 32118

City/State and Zip Code

jbrian@innercircleus.com

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

For further information concerning this matter, please call:

Julie Brian

Name of Person

at (386) 267-1687

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

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

Inner Circle Daytona 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 4/27/10 and assigned  
Florida document number L10000045104.

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 "LLC."

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:

New Registered Office Address:

Enter Florida street address

Florida

City

**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

**FILED**  
19 JUL 22 PM 3:56  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

- 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	JNHRSA, LLC	12 Tidewater Dr. Ormond Beach, FL 32174	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	BREANNA BAILEY, LLC	2008 E. Clovelly Ln. St. Augustine, FL 32092	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	HRICKO, LLC	1791 Astor Farms PL Sandford, FL 32771	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Nalley, Stephen L.	2008 E. Clovelly Ln. St. Augustine, FL 32092	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Gillespie, Joseph	12 Tidewater Dr. Ormond Beach, FL 32174	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Tricko, Kent	1791 Astor Farms PL Sandford, FL 32771	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

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

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Dated July 15, 2010.

X Kent Tricko

Signature of a member or authorized representative of a member

Kent Tricko

Typed or printed name of signee