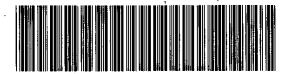
## L100000 66017

(Pani	uestor's Name)	· · ·
(Negi	·:	
(Addı	ess)	
, (Addı	essi	
(City/	State/Zip/Phone	#)
	_	
PICK-UP	☐ WAIT	MAIL
•		
(Ruei	ness Entity Nam	<u>.</u>
(Budi	ness chuty nam	e,
, (Doc	ument Number)	
•		•
Certified Copies	Certificates	of Status
*.		. !
Special Instructions to F	iling Officer:	·
		•
		,
· ·		
1		
		. 2
	*	
*	:	

Office Use Only



900182386359

06/23/10--01019--006 \*\*25.00

10 JUH 23 PM 3: 48

S. HAWKES

JUN 2 4 2010

**EXAMINER** 

## **COVER LETTER**

TQ: Registration Section Division of Corporations	
SUBJECT: INTERNATIONAL KESERVE (QNSULTANTS 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:	
ALEXANDER M. MORIN	
Name of Person	- 1 1 /
INTERNATIONAL RESERVE GNSUFFANTE	) LLC
79 (V) GLADES RD SUITE 505	
Address	
HOCA RATION FL. 33434	
City/State and Zip Code	1
E-mail address: (to be used for future annual report notification)	1
For further information concerning this matter, please call:	
MEXAMINER M MORIN TO 100-0040	
Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
*25.00 Filing Fee \$\ \text{S30.00 Filing Fee & }\ \text{Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{\$\text{S60.00 Filing Fee, }\ \text{Certified Copy (additional copy is enclosed)}}	
MAILING ADDRESS: STREET/COURIER ADDRESS:	
Registration Section Registration Section Division of Corporations Division of Corporations	
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle	•
Tallahassee, FL 32301	*

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	. (1)		
INTERNATIONA	L KESPA	VF (	ONSULTANTS !
(Name of the Limited Liability (A Florida Li	Company as it now appears	on our record	<u>ls.</u> )
(11.101144.21	• • • • • • • • • • • • • • • • • • •	دادماء	
The Articles of Organization for this Limited Liability Co	mpany were filed on <u>U</u>	0/21/1	O and assigned
Florida document number <u>L1</u> 0000666	<u>9</u> 17	V	
		, 1	
This amendment is submitted to amend the following:		•	
A. If amending name, <u>enter the new name of the limit</u>	ad lighility company have	l •	
A. It amending name, enter the new name of the minu	ed nathrity company nere	•	· · · · · · · · · · · · · · · · · · ·
The new name must be distinguishable and end with the word	le "Limited Liability Compar	y " the designs	ition (LLC" of the abbreviation
'L.L.C."	is Ellinted Liability Compan	iy, ilie desigila	MION LLC Office aboveviation
Enter new principal offices address, if applicable:		τ	3 En
Principal office address MUST BE A STREET ADDRI	FCC)		7 3 W
Frincipal Office address MOST BE A STREET ADDRE	2007		بن بن
	-		
Futan nam mailing address if applicable.			High and the second
Enter new mailing address, if applicable:	<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)	18.00		
		:	
B. If amending the registered agent and/or registe	ered office address on o	ur records, e	nter the name of the new
registered agent and/or the new registered office addre			
			•
Name of New Registered Agent:			,
New Registered Office Address:			
1304 Registered Office Address.	Enter Florida street address Florida		
	City	, FIOTI	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, <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 **Address Type of Action** Title LEXANDER M. MORIN Remove □ Add ☐ Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00