

L10000675702

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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 AUG 19 PM 2:56

T. HAMPTON

AUG 20 2010

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: INNOVATED INVESTMENT 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:

WATSON GASPARD

Name of Person

Firm/Company

550 NW 144 STREET

Address

MIAMI, FL. 33168

City/State and Zip Code

WGASPARD@ATT.NET

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

For further information concerning this matter, please call:

WATSON GASPARD

Name of Person

at (**305**)

877-6666

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

10 AUG 19 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 16, 2010

WATSON GASPARD ***** 2ND MAILING *****
550 NW 144 ST
MIAMI, FL 33168

SUBJECT: INNOVATED INVESTMENT SOLUTIONS LLC
Ref. Number: L10000075702

We have received your document for INNOVATED INVESTMENT SOLUTIONS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II

Letter Number: 010A00018964



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 6, 2010

WATSON GASPARD
550 NW 144 ST
MIAMI, FL 33168

SUBJECT: INNOVATED INVESTMENT SOLUTIONS LLC
Ref. Number: L10000075702

We have received your document for INNOVATED INVESTMENT SOLUTIONS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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Tammy Hampton
Regulatory Specialist II

Letter Number: 010A00018964

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

INNOVATED INVESTMENT 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 JULY 19, 2010 and signed

Florida document number L10000075702.

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:

New Registered Office Address:

Enter Florida street address

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

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10 AUG 19 PM 2:56

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:

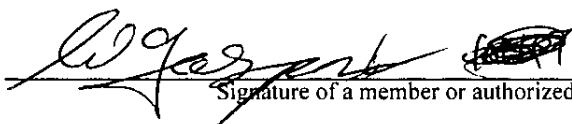
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	JULES, JUDITH	550 NW 144 STREET	<input type="checkbox"/> Add
		MIAMI, FL. 33168	<input checked="" type="checkbox"/> Remove
MGR	JUNIOR GASPARD	550 NW 144 STREET	<input checked="" type="checkbox"/> Add
		MIAMI, FL. 33168	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

FILED
10 AUG 19 PM 2:56
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Dated _____



Signature of a member or authorized representative of a member

WATSON GASPARD

Typed or printed name of signee