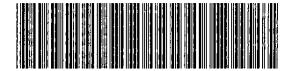
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ZOULHAR IN PHOS PATE

C. LEWIS MAR 1 4 2011 EXAMINER

COVER LETTER

O: Registration Section Division of Corporations							
SUBJECT:	Interpost Financial Incurance Concepts IIIC						
SUBJECT:	Name of Limited Liability Company						
	of Amendment and fee(s) are sub pondence concerning this matter						
	Ş	Sean W. Kelley, Esq.					
		Name of Person					
	Kelley & Corneal, P.L.						
Firm/Company							
	_	904 Anastasia Blvd.					
		Address	-				
	St. Augustine, FL 32080						
	City/State and Zip Code						
	E-mail address: (RAV4DVE@aol.com to be used for future annual report notifica	tion)				
For further information	concerning this matter, please of	eall:					
	Sean Kelley	at (904) 8	19-9706				
Name of Person		Area Code & Daytime	Celephone Number				
Enclosed is a check for	the following amount:						
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
	LING ADDRESS: stration Section	STREET/COURIE Registration Section	R ADDRESS:				

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ZOILHAR II PM # 26

SECALIARY OF STATE TALLAHASSEE. FLORIDA

Intersect Financial Insurance Concepts, 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 Liab	ility Company were filed on	September 23, 2010 and assigned	
Florida document numberL100000995	90		
This amendment is submitted to amend the follow	ing:		
A. If amending name, <u>enter the new name of th</u>	ne limited liability company	<u>/ here</u> :	
The new name must be distinguishable and end with t "L.L.C."	he words "Limited Liability Co	ompany," the designation "LLC" or the abbreviati	OI
Enter new principal offices address, if applicab	le:		
(Principal office address MUST BE A STREET)	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u></u>		
	<u></u>		
B. If amending the registered agent and/or	registered office address of	on our records, enter the name of the ne	·
registered agent and/or the new registered offic	e address here:		
Name of New Registered Agent:			
New Registered Office Address:		Enter Florida street address	
	Enter Ptortaa street aaaress		
	City	, Florida Zip Code	
	UIII	rap cone	

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>	<u>Address</u>	Type of Action
MGR	Thomas Van Eimeren	1888 S. Cappero Drive St. Augustine, FL 32086	✓ Add
MGRM	Richard Watson	1888 S. Cappero Drive St. Augustine, FL 32086	Add Z Remove
			····
MGRN	Thomas Van Eimeren	1888 S. Cappero Drive St. Augustine, FL 32086	Add Remove
MGRM	Dorothy Van Eimeren	1888 S. Cappero Drive St. Augustine, FL 32086	Add Remove
Pres.	Thomas Van Eimeren	1888 S. Cappero Drive St. Augustine, FL 32086	✓ Add Remove
VP	Dorothy Van Eimeren	1888 S. Cappero Drive St. Augustine, FL 32086	✓Add Remove
D. If an	nending any other information, enter cha	nge(s) here: (Attach additional sheets, if necessa	ry.)
	Add Secretary-Shannon Compton-	1888 S. Cappero Dr.,St. Augustine, FL 3	32086
	Add Treasurer - Richard Watson -	1888 S. Cappero Dr., St. Augustine, FL 3	
	This amendment reflects the change	ge of the company from a member mana	ged by 2
	entity to a manager managed comp	pany. This amendment establishes the	2011 HAR 11
	election of officers.		SSEE IN P
Dated	March 2	2011	FLOR THE CO.
			RIDA RIDA
	•	her or authorized representative of a member nomas Van Eimeren	
		ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00