

L10000099590

(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:

Office Use Only



600197232816

03/11/11--01015--020 **25.00

FILED
2011 MAR 11 PM 1:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
MAR 14 2011
EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Intersect Financial Insurance Concepts, 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:

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

RAV4DVE@aol.com

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

For further information concerning this matter, please call:

Sean Kelley

Name of Person

at (904)

819-9706

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

FILED
2011 MAR 11 PM 4:26
SECRETARY 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 Liability Company were filed on September 23, 2010 and assigned
Florida document number L10000099590.

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

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	Thomas Van Eimeren	1888 S. Cappero Drive St. Augustine, FL 32086	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Richard Watson	1888 S. Cappero Drive St. Augustine, FL 32086	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Thomas Van Eimeren	1888 S. Cappero Drive St. Augustine, FL 32086	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Dorothy Van Eimeren	1888 S. Cappero Drive St. Augustine, FL 32086	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Pres.	Thomas Van Eimeren	1888 S. Cappero Drive St. Augustine, FL 32086	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
VP	Dorothy Van Eimeren	1888 S. Cappero Drive St. Augustine, FL 32086	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

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

Add Secretary-Shannon Compton-1888 S. Cappero Dr., St. Augustine, FL 32086

Add Treasurer - Richard Watson - 1888 S. Cappero Dr., St. Augustine, FL 32086

This amendment reflects the change of the company from a member managed entity to a manager managed company. This amendment establishes the election of officers.

Dated March 2, 2011


Signature of a member or authorized representative of a member

Thomas Van Eimeren
Typed or printed name of signee

FILED
 2011 MAR 11 PM 1:26
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA