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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



**FOUNTAIN
SCHULTZ
& ASSOCIATES**

Attorneys at Law

KENNETH R. FOUNTAIN

KERRY ANNE SCHULTZ

SCOTT C. BRIDGFORD

June 13, 2011

VIA REGULAR U.S. MAIL

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: Incite Solutions, L.L.C.

Dear Sir or Madam:

Enclosed please find the following instruments:

1. Cover Letter;
2. Original and one copy of the Articles of Amendment to Articles of Organizations of Incite Solutions, L.L.C.; and
3. Check in the amount of \$25.00 for filing the Articles of Amendment.

Please return a filed copy to me in the enclosed pre-addressed, stamped envelope.

Should you have any questions, please advise. Thank you for your assistance in this matter.

Sincerely,
Fountain, Schultz & Associates, P.L.


Kerry Anne Schultz

KAS: mac
Enclosures

2045 FOUNTAIN PROFESSIONAL CT

SUITE A

NAVARRE, FLORIDA 32566

TEL: (850) 939-3535

FAX: (850) 939-3539

SANTA ROSA BEACH

TEL: (850) 622-2700

FAX: (850) 622-2722

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INCITE SOLUTIONS, L.L.C.
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:

Kerry Anne Schultz, Esquire

Name of Person

Fountain, Schultz & Associates, P.L.

Firm/Company

2045 Fountain Professional Court, Suite A

Address

Navarre, Florida 32566

City/State and Zip Code

kaschultz@fountainlaw.com

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

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Kerry Anne Schultz, Esquire

Name of Person

at (850)

939-3535

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**

INCITE SOLUTIONS, L.L.C.

(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 October 1, 2010 and assigned Florida document number L10000103265.

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)

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TALLAHASSEE, FLORIDA

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>
MGRM	Scott Rayner	3 Center Street Gulf Breeze, Florida 32561	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Naila Haffar	3 Center Street Gulf Breeze, Florida 32563	<input checked="" type="checkbox"/> Add <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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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

Dated June 13, 2011

Signature of a member or authorized representative of a member
Kerry Anne Schultz, Esquire

Typed or printed name of signee

Registered Agent.