

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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COVER LETTER

TO: Registration Se Division of Cor	ection porations		
	IVE DETENTION SYSTEMS	, L.L.C.	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Bradly Roger Bettin, Sr.		·
		Name of Person	
	Cantwell & Goldman, P.A		
		Firm/Company	
	96 Willard Street, Suite 30	2	
		Address	
	Cocoa, Florida 32922		
		City/State and Zip Code	
	gk@innovativedetentionsys		
	E-mail address: (to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please ca	all:	
Bradly Roger Bettin, Sr. 321 639-1320, extension 120 at (
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for the	he 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

Innovative Detention Systems, LLC						
(Name of the Limite	ed Liability Compa (A Florida Limited I	ony as it now appears on our record Liability Company)	<u></u>)			
The Articles of Organization for this Limited Li Florida document number <u>L10000109505</u>	ability Company	were filed on October 20, 2010	and assigned			
This amendment is submitted to amend the follo	wing:					
A. If amending name, enter the new name of	the limited liab	ility company here:				
IDSAL, LLC						
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation "LLC	" or the abbreviation "L.L.C"			
Enter new principal offices address, if applicable:		5645 Miles Spring Road				
(Principal office address MUST BE A STREET ADDRESS)		Pinson, AL 35126				
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		P.O. Box 593 Pinson, AL 35126	15 007 - 8			
B. If amending the registered agent and/ registered agent and/or the new registered of	fice address her	<u>e</u> :				
Name of New Registered Agent:	gistered Agent: Bradly Roger Bettin, Sr.					
New Registered Office Address:	96 Willard Stre	eet, Suite 202				
	•	Enter Florida street addres	NS .			
	Cocoa	, Fl	orida <u>32922</u>			
		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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Glenda Kirkland	5645 Miles Spring Road	Add
		Pinson, AL 35126	Remove
			☐ Change
MGR	Ronald Coose	1115 Ridge Drive	Add
		Shorewood, IL 60404	■ Remove
			☐ Change
			Add
			□ Remove
			Silange HAS
			PR DRemove
			Change
			□ Add
			Remove
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(It an ef <u>Note:</u>	Date of Filing (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. If the date inserted in this block does not meet the applicable statutory filing requirements, this date ment's effective date on the Department of State's records.	.) Pursuai		
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. a 90th day after the record is filed.	on the	earli	er of:
Dated	October 7 , 2015			

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Typed or printed name of signce

Filing Fee: \$25.00