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MICHAEL AY OF SIATE

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	Insight Investme	ent Group of S FL 5 LL	C			
		nited Liability Company	· 			
The enclosed Arti	cles of Amendment and fee(s) are su	bmitted for filing.				
Please return all c	orrespondence concerning this matte	er to the following:	,			
		Jamie garner				
		Name of Person				
	Insight In	vestment Group of S FL 5	LLC			
		Firm/Company				
		172-174 NE 8th St				
		Address				
		Homestead FL 33030	•			
		City/State and Zip Code	***			
		2155952@gmail.com (to be used for future annual report not)	(N			
		•	incation)			
For further inform	ation concerning this matter, please	call:				
Jaime Garner		at (_941_)	875-1943			
	Name of Person	Area Code & Daytir	ne Telephone Number			
	k for the following amount:					
\$25.00 Filing I	Fee \$\int_\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
MAILING ADDRESS: Registration Section		STREET/COUR Registration Secti				
	Division of Corporations P.O. Box 6327	Division of Corporations				
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Cente Tallahassee, FL 32301					

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Insight In	vestment G	roup of S FL	5 LLC s on our records.)		
(Name of the Limited (A	Florida Limited L	iability Company)	,		
The Articles of Organization for this Limited Liability Company were file			12/10/2010	and assig	gned
Florida document numberL10000126					
This amendment is submitted to amend the follo	wing;				
A. If amending name, enter the new name of	the limited liab	ility company here	:		
	N/A	i.			
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Compan	y," the designation "	LIG or the ab	breviation
Enter new principal offices address, if applicable:		172-174 NE 8	th St	-6	N. S. Sales Marie
(Principal office address MUST BE A STREET	(ADDRESS)	Homestead Fl	_ 33030	<u> 영화 구</u>	17
				05	
Enter new mailing address, if applicable:		Same as abov	e	ジ	
(Mailing address MAY BE A POST OFFICE B	BOX)				
B. If amending the registered agent and/o registered agent and/or the new registered off Name of New Registered Agent:		2:	ır records, <u>enter</u>	the name of	the new
New Registered Office Address:	172-174 NE 8th St		•		
	Enter Florido			dress	
	Н	omestead	, Florida	33030	
		City		Zip Code	
New Registered Agent's Signature, if changing R	egistered Agent:				
I hereby accept the appointment as registerea the provisions of all statutes relative to the pr accept the obligations of my position as regist being filed to merely reflect a change in the re company has been notified in writing of this c	oper and completered agent as pegistered office	lete performance o provided for in Cha	f my duties, and I apter 608, F.S. Or, confirm that the li	am familiar w if this docum mited liability	vith and ent is

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Page 1 of 2

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>	Address	Type of Action
MGRM	Nuwan Perera	172-174 NE 8th St Homestead FL 33030	Add ✓ Remove
<u>MGRM</u>	Jamie Garner	172-174 NE 8th Sr Homestead FL 33030	Add Remove
			Add Remove
D. If amendi	ing any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	
			_
Dated	Mad ~	or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00