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(Re	equestor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	/
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D. SCOTT JAN 4 2017

COVER LETTER

	distration Sec			
SUBJECT:	Interphaze H	Holdings LLC		
oobsider.		Name of Lim	ited Liability Company	
The enclosed	d Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		Robert Lee Jones		
			Name of Person	
			Firm/Company	
		9651 60th Street North		
			Address	
		Pinellas Park Florida 3378:	2	
		drray7290@yahoo.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report notification)	
For further is	nformation co	ncerning this matter, please ca	all:	TALLER TO
Raymond Jo			813 525-1171 at ()	
	Name of	Person	Area Code Daytime Teleph	one Number
Enclosed is a	check for the	e following amount:		20
■ \$ 25.00 F	iling Fee	S30.00 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)
•			_	

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

Interphaze Holdings LLC		
(<u>Name of the Limited</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab	pility Company were filed on 05/16/2011	and assigned
Florida document number L11000057687		
his amendment is submitted to amend the follow	ving:	
A. If amending name, <u>enter the new name of t</u>	he limited liability company here:	
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:	
Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	r registered office address on our records, <u>ente</u> ce address here:	r the name of the ne
		SEC SEC
Name of New Registered Agent:		三 美工
New Registered Office Address:		変数 3 円
	Enter Florida street address	
	, Florida _	Zib Eode 2
	Cuy	ZIP COAE

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>	Name	Address	Type of Action
MGR	Robert Lee Jones	9651 60th Street N Pinellas Park Fl 33782	<u>^_</u> ⊟ Add
		· · · · · · · · · · · · · · · · · · ·	□ Remove
			☐ Change
		 	Add
			☐ Remove
			Change
	-		Add
			□ Remove
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			-3 Add Paremove
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			Add
			Remove
			□ Change

Effective date, if other than the date of filing: [If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 695.020. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The 90th day after the record is filed. Signature of a member or authorized representative of a member.				
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Signature of a member or authorized representative of a member		/ 		一
Signature of a member or authorized representative of a member	/\ \	MATTER		当会 一
·	-	Signature of a member or	authorized representative of a member	三 三 三
	Raymond Jo			2 2

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00