

L11000064381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 JUN 20 AM 9:59

FILED

C. LEWIS
JUN 21 2011
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 9, 2011

JULIE A. MURPHY
INDABA 360 LLC
815 TANGERINE WAY
GULF STREAM, FL 33483

SUBJECT: INDABA 360 LLC
Ref. Number: L11000064381

We have received your document for INDABA 360 LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 711A00014158

815 Tangerine Way
Gulf Stream
FL 33483

3 June 2011

Registration Section
Division of Corporations
P O Box 6327
Tallahassee
FL 32314

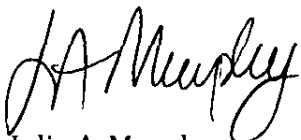
Dear Sir/Madam

Change to Company Name: Document Number L11000064381

I registered a company incorrectly under the name of Indaba 360 LLC. Enclosed please find a check for \$25 and an amendment form to rename the company as Indaba LLC.

Thank you.

Sincerely

A handwritten signature in cursive script, appearing to read "Julie A. Murphy".

Julie A. Murphy
Tel 561. 809.0348

815 Tangerine Way
Gulf Stream
FL 33483

16 June 2011

Carolyn Lewis
Regulatory Specialist II
Registration / Qualification
Division of Corporations
P O Box 6327
Tallahassee
FL 32314

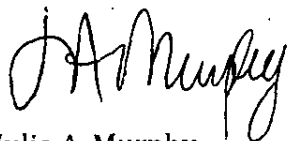
Dear Ms Lewis

Change to Company Name: Letter Number 711A00014158

Enclosed please find a copy of your letter dated June 9 and a copy plus original of the corrected amendment form to rename the company as Indaba Group LLC.

Thank you.

Sincerely

A handwritten signature in black ink, appearing to read 'Julie A. Murphy', with a stylized, cursive script.

Julie A. Murphy
Tel 561. 809.0348

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

INDABA 360 LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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The Articles of Organization for this Limited Liability Company were filed on 6/2/2011 and assigned
Florida document number L 11 00 00 64381

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

INDABA GROUP, LLC

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:

SAME ADDRESS

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

SAME ADDRESS.

(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:

NO CHANGE

New Registered Office Address:

NO CHANGE

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

MG = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<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

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 JUN 20 AM 9:59

FILED

Dated 6/3/2011

JA Murphy

Signature of a member or authorized representative of a member

JULIE A. MURPHY

Typed or printed name of signee