

L11000073703

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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07/08/13--01012--024 **25.00

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Insight Tax Group, LLC

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:

Ron Gustafson

Name of Person

Insight Tax Group, LLC

Firm/Company

725C Commerce Center Drive

Address

Sebastian, FL 32958

City/State and Zip Code

insightfinancial@comcast.net

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

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For further information concerning this matter, please call:

Ron Gustafson

Name of Person

772 589-8927

at ()

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**

Insight Tax Group, LLC

(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 June 24th 2011 and assigned
Florida document number L11000073703.

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)

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

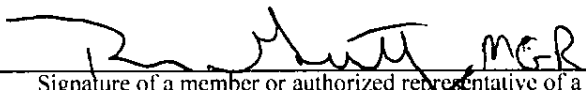
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Carole Donovan	1049 S. 13th Square	<input type="checkbox"/> Add
		Vero Beach, FL 32958	<input checked="" type="checkbox"/> Remove
MBR	Brittaney Conley	13651 Hauser St.	<input checked="" type="checkbox"/> Add
		Suite 102	<input type="checkbox"/> Remove
		Overland Park, KS 66221	
MBR	Richard Reitinger	6545 Martinque Way	<input checked="" type="checkbox"/> Add
		Vero Beach , FL 32967	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

CLERK OF DISTRICT COURT
FLORIDA
2013 JUL -8 PM 3:10

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

Dated July 5th, 2013.



Signature of a member or authorized representative of a member

Ron Gustafson

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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