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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FEB 26 2013

T. HAMPTON

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Tap to Inspect, 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:

Enan E. Stillman

\_\_\_\_\_  
Name of Person

Graham & Jensen, LLP

\_\_\_\_\_  
Firm/Company

17 Executive Park Dr., Ste. 115

\_\_\_\_\_  
Address

Atlanta, GA 30329

\_\_\_\_\_  
City/State and Zip Code

estillman@grahamjensen.com

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

For further information concerning this matter, please call:

Enan E. Stillman

404

835-9974

at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
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

# GRAHAM & JENSEN LLP

ATTORNEYS AT LAW

17 Executive Park Drive  
Suite 115  
Atlanta, Georgia 30329  
tel 404 842 9380  
fax 678 904 3110  
online [www.grahamandpenman.com](http://www.grahamandpenman.com)

February 20, 2014

**VIA CERTIFIED MAIL RETURN RECEIPT REQUESTED**

Florida Department of State  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Re: Tap to Inspect, LLC**

Dear Clerk:

The Enclosed Articles of Amendment and Filing Fees are submitted for filing.

Also enclosed is our firm check # 4307 in the amount of \$25.00 to cover the filing fees.

Thank you for your assistance in this matter. Please do not hesitate to contact me if you have any questions.

Sincerely,

  
Jessica Avila  
Legal Assistant

Enclosures

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

Tap to Inspect, 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 October 24, 2011 and assigned  
Florida document number L11000120997

This amendment is submitted to amend the following:

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

Inspection Data Systems, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

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

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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated February 19, 2014.



Signature of a member or authorized representative of a member

Enan E. Stillman, Esq.

Typed or printed name of signee

**FILED**

**2014 FEB 25 AM 10:27**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**