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RE	FL SOS - LZ order # 502544070	

#### **COVER MESSAGE**

Tony Burroughs

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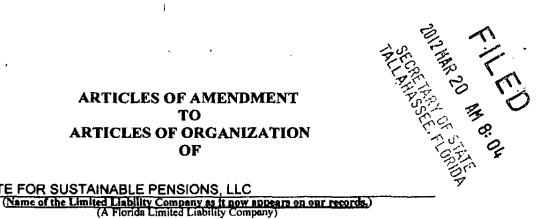
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## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: INSTITUTE FOR SUSTAINABLE PENSIONS, LLC	The state of			
SUBJECT: INSTITUTE FOR SUSTAINABLE PENSIONS, 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:				
Fig.				
The enclosed Articles of Amendment and fee(s) are submitted for filing.	Rich 14			
Please return all correspondence concerning this matter to the following:				
	ADE.			
Barbara Dang	,			
(Name of Person)				
Legalzoom.com, Inc.				
(Firm/Company)				
100 W. Broadway Suite 100				
(Address)				
Glendale, CA 91210				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
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Enclosed is a check for the following amount:				
\$25.00 Filing Fee \$\ \times \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
MAILING ADDRESS:  Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  STREET/COURIER ADDRESS: Registration Section Division of Corporations Division of Corporations Clifton Building Tallahassee, FL 32314  Executive Center Circle Tallahassee, FL 32301				

# ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

INSTITUTE FOR SUSTAINABLE PENSIONS, LLC



The Articles of Organization for this Limited Liability Company were filed on 11/01/2011 \_\_ and assigned Florida document number <u>L11000124581</u> 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." 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)

#### 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.

(City)

(If Changing Registered Agent, Signature of New Registered Agent)

MGR = Manager

MGRM = Managing Member

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:

<u>Title</u>	Name	Address	Type of Action
MGR	PRICE, GARY B	3003 TAMIAMI TRAIL NORTH, STE 410 NAPLES EL 34103 US	Add Remove
MGR/M	Fifth Avenue Advisors LLC	3003 TAMIAMI TRAIL NORTH, STE 410 NAPLES FL 34103 US	SE Add Remove
			Aid Remove
			AddRemove
			Add Remove
			Add
D. If smend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary	.) 
			- <del></del>
Dated	2-14-12	·	
	Signature of a member	r or authorized representative of a member	<del></del>
	Gary Price		

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00