## 2/20000a48/8

| (Requestor's Name)                      |
|---|
|   |
| (Address)                               |
|   |
| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
| (6-4), 6-11-6-1-7                       |
| PICK-UP WAIT MAIL                       |
|   |
|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
|   |
| Special Instructions to Filing Officer: |
| Special instructions to ruing Officer.  |
| THE A C SPEE                            |
| AUG 2 8 2013                            |
| A. I.UNT                                |
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## **COVER LETTER**

| TO: Registration S Division of Co |   |   |   |
|-----------------------------------|---|---|---|
| SUBJECT: ICB Ma                   | nagement, LLC   |   |   |
| SUBJECT:                          |   | ed Liability Company  |   |
| The enclosed Articles of          | of Amendment and fee(s) are sub-  | mitted for filing   |   |
|                                   | condence concerning this matter   | -   |   |
|                                   |   |   |   |
|                                   | Nisha E. Bacchus, Es  | sq.   |   |
|                                   | •   | Name of Person  | 213 BB 28   |
|                                   | Law Office of Nisha E   | E. Bacchus, P.A.  | <b>一种</b>   |
|                                   |   | Firm/Company  | 7/1 · · · · · · · · · · · · · · · · · · ·   |
|                                   | 633 SE 3rd Avenue,  | Suite 301   |   |
|                                   |   | Address   |   |
|                                   | Fort Lauderdale, FL   | 33301   | **  |
|                                   |   | City/State and Zip Code   |   |
|                                   | NBacchus@nishabac   |   |   |
| For further information           | E-mail address: (to concerning this matter, please c  | o be used for future annual report notificati all:  | on)   |
| Nisha Bacchus                     |   | <sub>at (</sub> 954 <sub>)</sub> 3943557  |   |
| Name                              | e of Person   | Area Code & Daytime Te  | elephone 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) |
| Regi<br>Divis<br>P.O.             | ILING ADDRESS:<br>stration Section<br>sion of Corporations<br>Box 6327<br>shassee, FL 32314 | STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 32301 | ons<br>r Circle   |

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limited L | ability Compar<br>orida Limited L | ny as it now appears on our r<br>iability Company) | ecords.)                             |
|--|-----------------------------------|--|--------------------------------------|
| The Articles of Organization for this Limited Liab Florida document number L12000024818  | ility Company                     | were filed on 02/21/2012                           |                                      |
| This amendment is submitted to amend the follow  |                                   |  | 283 mg 26                            |
| A. If amending name, enter the new name of the   | <u>ie limited liab</u>            | ility company here:                                | Hog H                                |
| The new name must be distinguishable and end with t "L.L.C."   | he words "Limi                    | ted Liability Company," the de                     | esignation "LUC" or the abbreviation |
| Enter new principal offices address, if applicab   | le:                               | 633 SE 3rd Avenue                                  | _                                    |
| (Principal office address MUST BE A STREET)  | ADDRESS)                          | Suite 301  |                                      |
|  |                                   | Fort Lauderdale, FL 3                              | 33301                                |
| Enter new mailing address, if applicable:  |                                   | 633 SE 3rd Avenue, S                               | Suite 301                            |
| (Mailing address MAY BE A POST OFFICE BOX)   |                                   | Suite 301  |                                      |
|  |                                   | Fort Lauderdale, FL 3                              | 33301                                |
| B. If amending the registered agent and/or registered agent and/or the new registered office  Name of New Registered Agent:  | e address her                     |  |                                      |
| New Registered Office Address:   | 633 SE 3rd                        | Ave, Suite 301                                     |                                      |
| tion registered Office Address.  |                                   |  | la street address                    |
|  | Fort Lauder                       | dale   | Florida 33301                        |
|  |                                   | 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, whereby 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 Title . **Type of Action** <u>Name</u> <u>Address</u> Add Remöve Remove Remove Remove Remove Remove

| • | • •   | · · · · · · · · · · · · · · · · · · · |
|---|---|---------------------------------------|
|   |   | 2013 麗                                |
| d | August 23, 2013   | 1. A 17. S 5. C 1.                    |
|   | Signature of a member or authorized representative of a member  NisHA E. BACCHUS Esq. |                                       |

Page 3 of 3

Filing Fee: \$25.00