

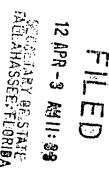
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D. BRUCE

APR 0 4 2012

EXAMINER

COVER LETTER

TO: Registration S Division of Co		
SUBJECT:	Insight Interactive LLC Name of Limited Liability Company	_
	of Amendment and fee(s) are submitted for filing. condence concerning this matter to the following:	
	Elliott Deerling Name of Person	<u></u>
	Insite Interactive LLC Firm/Company	
	11420 US Hwy One PMB 147 Address	
	North Palm Beach, FL 33408 City/State and Zip Code	
	cpajen@gmail.com E-mail address: (to be used for future annual report notification)	AL CONTROLL OF THE CONTROLL OF
	Concerning this matter, please call: R Christiansen, CPA at (561) 827-1507	>
Name (of Person Area Code & Daytime Telephone N	umber
Enclosed is a check for t	Certificate of Status S55.00 Filing Fee & S60.0 Certificate of Status Certified Copy Certified Copy is enclosed)	00 Filing Fee, tificate of Status & rtified Copy ditional 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 Interactive, L	در
(Name of the Limited Liability Company as it r (A Florida Limited Liability Company)	now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were fil	ed on March 12, 2012 and assigned
Florida document number L12000034495	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability con	npany here:
Insite Interactive LL	_C
The new name must be distinguishable and end with the words "Limited Liabi "L.L.C."	lity Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	75- 25- 25- 25- 25- 25- 25- 25- 25- 25- 2
	ASS.
Enter new mailing address, if applicable:	(A)
	是多是阿
(Mailing address MAY BE A POST OFFICE BOX)	
***	2
B. If amending the registered agent and/or registered office add 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	7 in 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-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 Name Address **Type of Action** ☐ Add ☐ Remove ☐ Remove Remove ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) Dated 29 March Signature of a member or authorized representative of a member Elliot Deerling Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00