L12000052774

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SECREJARY OF STATE

K.SALY EXAMINER JUN 28

COVER LETTER

	gistration Section of Corp			
SUBJECT:		ADVICE, LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	n all correspon	ndence concerning this matter	to the following:	
		JAVIER MARKOWICZ		
			Name of Person	
		MARKOWICZ INTERNA	TIONAL LAW	
			Firm/Company	
		2999 NE 191 ST # 702		
			Address	
		AVENTURA, FLORIDA,	33180	
			City/State and Zip Code	
		INFO@MRKINTERNATIO	ONALLAW.COM to be used for future annual report notif	ication)
For further is	nformation co	oncerning this matter, please ca		ication,
CARLOS G	ROSSMAN		786 371-1295	
Name of Person			e Telephone Number	
Enclosed is	a check for th	e following amount:		
■ \$25.00 F	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

FILED
2016 JUN 24 PM 1:33

ICB ADS & ADVICE, LLC

(Name of the Limited Liability Company as it now appears on our records.) A LLA B.

(A Florida Limited Liability Company)

(A Florida	Limited Liability Company)	ALLAHASSEE. FLORIDA
The Articles of Organization for this Limited Liability Co	ompany were filed on 04/18/2012	and assigned
Florida document number L12000052774	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr		rds, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	ress
		Florida
	City	zip Coae

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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	EDGAR TATMAN	2999 NE 191 ST # 702	 Add
		AVENTURA, FL 33180	□ Remove
			☐ Change
			□ Remove
			Change Change
			OR Change
			□ Add
			□ Remove
			Change
			Add
		 	Remove
			☐ Change
			Add
			☐ Remove
			☐ Change

							
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ffective date an effective dat	e, if other than the date te is listed, the date must be s	e of filing: pecific and canno	t be prior to date	of filing or more tha	(option 190 days after	nal) filing.) Pursuant to	605.0207
iote: If the da	ate inserted in this block of fective date on the Depart	loes not meet th	e applicable sta	tutory filing requ	irements, this	date will not be	listed as
	ecifies a delayed eff day after the record		but not an e	ffective time,	at 12:01 a	.m. on the ea	rlier of
	JUNE 20		6				
ated							

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00