

L13 0000011039

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300248336803

06/19/13--01009--018 **25.00

FILED
2013 JUN 19 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Ouffigan JUN 20 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Instructional Technology Services 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:

Roberto Neuberger

Name of Person

Active Filings LLC

Firm/Company

3109 Stirling Rd., Suite 202

Address

Fort Lauderdale, FL 33312

City/State and Zip Code

operations@activefilings.com

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

For further information concerning this matter, please call:

Roberto Neuberger

Name of Person

at (**800 609-2521**)

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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
2013 JUN 19 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Instructional Technology Services 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 01/22/2013 and assigned
Florida document number L13000011039.

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."

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 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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	HINCAPIE, JORGE	311 SE 3RD ST 608	<input type="checkbox"/> Add
		DANIA BEACH, FL 33004	<input checked="" type="checkbox"/> Remove
		311 SE 3RD ST 608	
MGRM	Hincapie Vargas, Jorge Eduardo	DANIA BEACH, FL 33004	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Dated _____

DocuSigned by:

Jorge Hincapie

C22A62228EAA487

Signature of a member or authorized representative of a member

Jorge Eduardo Hincapie Vargas

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
2013 JUN 19 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA