

L13000058259

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

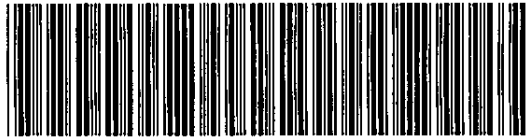
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700273800817

06/19/15--01008--021 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 JUN 20 AM 8:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 22 2015

S MASON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: IT Advisors 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:

Edward D Hom
Name of Person
IT Advisors LLC
Firm/Company
2541 Metrocentre Blvd, Suite #3
Address
West Palm Beach, FL 33407
City/State and Zip Code
djhoh@theitadvisors.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mireya R. Burak at 561 459-7420
Name of Person Area Code Daytime Telephone 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)

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
15 JUN 20 AM 8:52

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

IT Advisors 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 04/22/2013 and assigned Florida document number L13000058259.

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 contain 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 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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
15 JUN 20 11 08:52 AM

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>	<u>Type of Action</u>
MGRM	Edward D. Hom	2541 Metrocentre Blvd, Suite #3	<input type="checkbox"/> Add
		West Palm Beach, FL 33407	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
CEO	Edward D. Hom	2541 Metrocentre Blvd, Suite #3	<input checked="" type="checkbox"/> Add
		West Palm Beach, FL 33407	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
CTO	Joshua Hughes	2541 Metrocentre Blvd, Suite #3	<input checked="" type="checkbox"/> Add
		West Palm Beach, FL 33407	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
COO	Douglas Mustapick	2451 Metrocentre Blvd, Suite #3	<input checked="" type="checkbox"/> Add
		West Palm Beach, Fl 33407	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 19 JUN 20 AM 8:52
 TALLAHASSEE, FLORIDA

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

Multiple horizontal lines for amending information.

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated June 16, 2015

Handwritten signature of Mireya R. Burak

Signature of a member or authorized representative of a member

Mireya R. Burak

Typed or printed name of signee

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA 15 JUN 20 AM 8:52