

U3 000077651

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

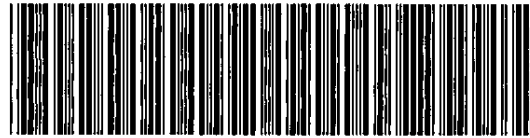
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900256839559

02/18/14--01020--002 \*\*25.00

RECEIVED  
FALLA...  
16 FEB 18 PM 2:34

Delivers FEB 19 2014

823

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** International3Enterpries,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:

Carl Clark

Name of Person

Firm/Company

24507 Paul Street.

Address

Sorrento, FL 32776

City/State and Zip Code

Killahr3@gmail.com

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

For further information concerning this matter, please call:

Carl Clark

Name of Person

at

407 413-9824

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &  
N/A 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**

International 3 Enterprises, Inc

(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 05/29/2013 and assigned  
Florida document number L13000077651.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

N/A

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:**

1802 North Woodlawn Blvd.

**(Principal office address MUST BE A STREET ADDRESS)**

Deland, FL 32720

**Enter new mailing address, if applicable:**

same as above

**(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:

Carl Clark

New Registered Office Address:

1802 North Woodlawn Blvd.

Enter Florida street address

Deland

City

Florida 32720

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.*

Carl Clark

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
Pres	Carl Clark	24507 Paul Street. Sorrento, FL 32776	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
VicePresident	Mattie Clark	24507 Paul Street Sorrento, FL 32776	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Secr.	TiffaneBradford	439 West Apopka Hills Apopka, FL 32703	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Tres.	Carl Clark Jr.	24507 Paul Street. Sorrento, FL 32776	<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

FILED  
FEB 18 2018  
TALLAHASSEE, FL  
CLERK OF COURT

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

N/A

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

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated February 11, 2014



Signature of a member or authorized representative of a member

Carl Clark

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

16 FEB 18 PM 2:34  
TALIAFERRO