Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H160000465373)))



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Division of Corporations

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From:

Account Name : GASSMAN, CROTTY & DENICOLO, P.A.

Account Number : 075350000514

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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BLLC AMND/RESTATE/CORRECT OR M/MG RESIGN INTELLECTUAL CONCEPTS, L.L.C.

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Corporate Filing Menu

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FEB 2 4 2016

Audit Pax# H160000465373

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INTELLECTUAL CONCEPTS, L.L.C.		
(Name of the Limited Liability (A Florida I	Company as it now appears on our limited Liability Company)	records.)
The Articles of Organization for this Limited Liability Co	ompany were filed on 07/23/2013	and assigned
Florida document number L13000104133	~**	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
IC SOFTWARE SERVICES, L.L.C.		
The new name must be distinguishable and contain the words "Limite	ed 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 ADDRE	<u>(SS)</u>	
D		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registe	ered office address on our re	cords, enter the pame of the new
registered agent and/or the new registered office addre	ess here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florido street address	
		, Florida
	Çity	Zip (.oae
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co accept the obligations of my position as registered agbeing filed to merely reflect a change in the registered company has been notified in writing of this change.	mpiete performance of my duti ent as provided for in Chapter d office address, I hereby confit	605, F.S. Or, if this document is me that the limited liability
	If Changing Registered Agent, Sign	

H160000465373
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>	Address	Type of Action
			D Add
			Remove
			Change
· 			D Add
			🗅 Remove
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D. II amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessor	ary.)
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·		
		748
		
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(If an effect	e date, if other than the date of filing: Feb. 23 2016 (optional ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing the date inserted in this block does not meet the applicable statutory filing requirements, this date's effective date on the Department of State's records.	
If the reco (b) The 9	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m Oth day after the record is filed.	n. on the earlier of:
Dated	Feb. 23	
Dated	0	
	Signature of a member or authorized representative of a member	20
	ALAN S. GASSMAN, Authorized Representative of Member	72 TI
	Typed or printed name of signee	2
	Page 3 of 3	~ (1, £1, ±1,
	rage 5 of 5	ှိ တွ
	Filing Fee: \$25.00	ATF 54