113000147398

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COVER LETTER

lbis Capita	I, LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Adam Beighley		
		Name of Person	
	Beighley, Myrick & Udell,	, P.A.	
		Firm/Company	
	2255 Glaes Road, #335W		
		Address	
	Boca Raton, FL 33431		
	•	City/State and Zip Code	
	E-mail address: (to be used for future annual report notific	cation)
For further information of	concerning this matter, please ca	all:	
Anna Yeaman		561 549-9036	
Name o	r Person	at ()	Telephone Number
Enclosed is a check for t	he 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

TO:

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

Ibis Capital, LLC	
(Name of the Limited Liability Company as it now a (A Florida Limited Liability Comp	appears on our records.) pany)
The Articles of Organization for this Limited Liability Company were filed or	on 10/18/2013 and assigned
Florida document number L13000147398	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compa	ny 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:	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	26
	£.
B. If amending the registered agent and/or registered office addresses agent and/or the new registered office address here:	ss on our records, enter the name of the nev
Name of New Registered Agent:	38 28
New Registered Office Address:	
Ente	er Florida street address
	. Florida

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.

Citv

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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	Adam Beighley	2255 Glades Road, Suite 335W	
		Boca Raton, FL 33431	■ Remove
			☐ Change
MGR Michael Freedland	Michael Freedland	110 SE 6th Street, Suite 2300	■ Add
		Fort Lauderdale, FL 33301	Remove
		*******	Change
			Add
			Remove
			AH (17)
			□ Remove
			☐ Change
		All and the second seco	Add
		——————————————————————————————————————	Remove
			Change
···- -			Add
			Remove
			☐ Change

ii ajiileitu	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	$\mathcal{Z}\mathcal{V}=\mathcal{L}.$
ffective an effecti	date, if other than the date of filing: (optional) ve 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 605.020
<u>Note:</u> If t	he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
ocument	's effective date on the Department of State's records.
e recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o
The 90	of the earlier of the record is filed.
ated	
	Signature of a member or authorized representative of a member
	Adam Borgh (1) Typed or printed name of signee

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Filing Fee: \$25.00