

L14000019467

(Requestor's Name)

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(Business Entity Name)

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Y SULKER

5/4/15

Please send all correspondence to

iHummingbird

1405 N. Congress Ave.

Suite 12

Delray Beach, FL 33445

Thank you —



Richard Bernie, CEO



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 18, 2015

RICHARD BERRIE
1405 N CONGRESS AVE. SUITE 12
DELRAY BEACH, FL 33445

SUBJECT: IHB DEVELOPMENT, LLC
Ref. Number: L14000019467

RECEIVED
15 JUN 29 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for IHB DEVELOPMENT, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PAGE 2 OF 3 WAS NOT INCLUDED WITH YOUR DOCUMENT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 915A00010349

FILED
2015 JUN 29 AM 11:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**TO
ARTICLES OF ORGANIZATION
OF**

IHB Development, 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 2/4/14 and assigned
Florida document number L14000019467.

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)

1405 N. Congress Ave.
Suite 12
Delray Beach, FL 33445

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1405 N. Congress Ave.

Suite 12

Delray Beach, FL 33445

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

MGR = Manager
AMBR = Authorized Member

☐ Add
☐ Remove
☐ Change
☐ Add


Lined area for document content.

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ALABAMA DEPT. OF REVENUE

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 May 4, 2015



Signature of a member or authorized representative of a member

Richard Berrie

Typed or printed name of signee