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T. BROWN

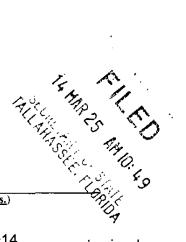
TO: Registration Se Division of Cor			
SUBJECT: Infinit	y Business Br	okers, LLC	
SUBJECT:		ited Liability Company	
	Amendment and fee(s) are submodence concerning this matter	•	
	Greg May		
		Name of Person	
	Kiesel and N	May, Attorneys at	Law
		Firm/Company	
	2121 McGre	gor Blvd.	
	-	Address	
	Fort Myers,	FL 33901	
	Michael.Monnot@	City/State and Zip Code Dyahoo.com to be used for future annual report notifi	ication)
For further information of	concerning this matter, please c	·	·
Greg May		_{at (} 239 ₎ 334-18	800
	f Person	Area Code Daytime	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

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



INFINITY BUSINESS BROKERS, 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 March 4, 2014 and assigned
Florida document number L14000036103	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
IBB Business Brokers, LLC	
The new name must be distinguishable and end with the words "Limited Liab	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1910 Park Meadows Drive Suite 202
(Principal office address MUST BE A STREET ADDRESS)	Fort Myers, FL 33907
	1010 Park Mandaws Drive Suite 202
Enter new mailing address, if applicable:	1910 Park Meadows Drive Suite 202
(Mailing address MAY BE A POST OFFICE BOX)	Fort Myers, FL 33907
B. If amending the registered agent and/or registered o	ffice address on our records, enter the name of the nev
registered agent and/or the new registered office address her	
Name of New Registered Agent:	
New Registered Office Address:	
New Registered Office (1states).	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

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:

$\mathbf{M}\mathbf{\tilde{G}}\mathbf{R} = \mathbf{M}$ $\mathbf{A}\mathbf{M}\mathbf{B}\mathbf{R} = \mathbf{A}$	MGR = ' Manager AMBR = Authorized Member			
<u>Title</u>	<u>Name</u>	Address	Type of Action	
			Add	
			Remove	
			□ Add	
			□ Remove	
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			□ Remove	

. If	amending any other information, enter change(s) here: (Attach additional sheets,	if necessary.)
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	•	
Eff.	fective date, if other than the date of filing: e effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 9	(optional)
	e date this document is filed by the Florida Department of State)	o days artor
_	March 2.1 2014	
Da	ared	
	Signature of a member of authorized representative of a member	 -
	Gregory A. May, Esq., as Authorized Represe	ntativo
	Typed or printed name of signee	manve
	1 year of market marke of signer	

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Filing Fee: \$25.00