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COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: IM HOMES OF DISTINCTION 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: |
| DAVID (TEFF) MCDONALD Name of Person TM HOMES OF DISTINCTION Firm/Company |
| Im Homes OF DISTINCTION Firm/Company |
| 3540 E RIVER DRIVE |
| GREEN BAY WI 54301 City/State and Zip Code |
| TEFFMENONALD @ ImitoD.com E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Name of Person at (204) 856 - 8350 Name of Person Area Code Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee Solution |
| |

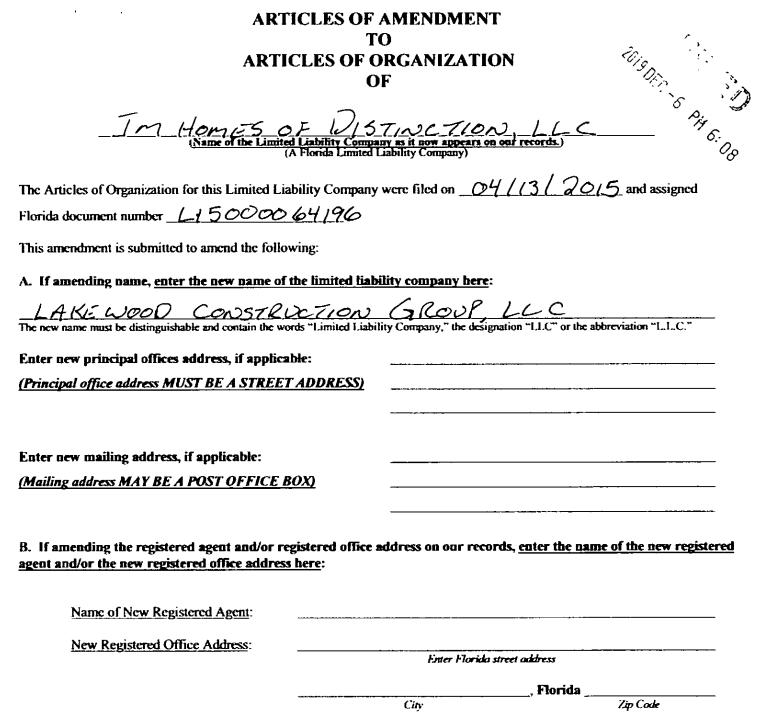
Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION



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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

| MGR = | Manager | |
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| AMRR = | Anthorized | Membe |

| <u>Title</u> | Name | Address | Type of Action |
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Filing Fee: \$25.00