

L15000096098

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

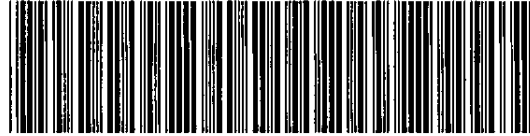
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

JUN 16 2015

Y SULKER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: IFBGROUPLLC

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:

YENNIFER COOPER

Name of Person

IFBGROUPLLC

Firm/Company

7679 SUGAR BEND DR

Address

ORLANDO, FL 32819

City/State and Zip Code

REOSOLDBYME@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

YENNIFER COOPER

321 277-9517
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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
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**

IFBGROUPLLC

(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 JUNE 2, 2015 and assigned
Florida document number L15000096098

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

IFB GROUP LLC

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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

If attending 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> | <u>Type of Action</u> |
|--------------|----------------|--------------------|-----------------------------------------|
| MGR | GUSTAVO SUAREZ | 7679 SUGAR BEND DR | <input checked="" type="checkbox"/> Add |
| | | ORLANDO, FL 32819 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | RONALD SUAREZ | 7679 SUGAR BEND DR | <input checked="" type="checkbox"/> Add |
| | | ORLANDO, FL 32819 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
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TALLAHASSEE, FLORIDA

2015 JUN 15 PM 12 12
SEC. OF STATE
TALLAHASSEE, FLA 32311

2015 JUN 15 PM 12 12
FEDERAL BUREAU OF INVESTIGATION
U.S. DEPARTMENT OF JUSTICE


The diagrams show four different circuit configurations for connecting a 100 ohm resistor to a 100 ohm load resistor. The first diagram shows a series connection. The second diagram shows a parallel connection. The third diagram shows a series connection with a different polarity. The fourth diagram shows a parallel connection with a different polarity.

(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)

(b) The 90th day after the record is filed.

th day after the record is filed.

NE 10 _____, 2015



Signature of a member or authorized representative of a member

Typed or printed name of signee