

Division of Corporations

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L15000138822

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : GEOFFREY M. MAYNE, P.A.
Account Number : 016770063401
Phone : (305) 361-8108
Fax Number : (305) 361-8109

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: gn@attorneymiami.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
IDEVELOPER LLC

Certificate of Status	0
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TALLAHASSEE, FLORIDA

MAY 12 2016
 J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: IDEVELOPER LLC

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:

Alexis Koratich

Name of Person

Geoffrey M. Wayns, P.A.

Firm/Company

135 San Lorenzo Ave., PH 840

Address

Coral Gables, FL 33146

City/State and Zip Code

gn@abogadomiami.com

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

For further information concerning this matter, please call:

Alexis Koratich

305 381-8108

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**

IDEVELOPER 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 08/17/2015 and assigned Florida document number L15000138822.

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)

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

City, Florida

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 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>
AMBR	GABINO JOSE CONTRERAS	135 SAN LORENZO AVENUE	<input type="checkbox"/> Add
	GAMARDO	PH 840	<input checked="" type="checkbox"/> Remove
		CORAL GABLES, FL 33146	<input type="checkbox"/> Change
AMBR	ALFONSO CONTRERAS	135 SAN LORENZO AVENUE	<input checked="" type="checkbox"/> Add
		PH 840	<input type="checkbox"/> Remove
		CORAL GABLES, FL 33146	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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