L17000064678

(Requ	estor's Name)	
(Addre	ess)	
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(City/S	State/Zip/Phone	#)
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SECRETARY OF STATE
AHASSEE FINE

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COVER LETTER

	Registration S Division of Co		,	
SUBJEC	· IPpay, LL T:	С		
30 BGEC		Name of Lim	ited Liability Company	
The enclo	osed Articles of	f Amendment and fee(s) are sub	mitted for filing.	,
Please ret	urn all corresp	ondence concerning this matter	to the following:	
		Craig I. Kelley, Esq.		
			Name of Person	
		Kelley & Fulton, P.L.		
			Firm/Company	
		1665 Palm Beach Lakes B	oulevard, Suite 1000	
			Address	
		West Palm Beach, FL 334	01	
			City/State and Zip Code	
		craig@kelleylawoffice.com	to be used for future annual report notifi	ication)
For furthe	er information of	concerning this matter, please ca	·	euton,
Craig I. k	Kelley, Esq.		561 491-1200 at ()	
		of Person	Area Code Daytime	Telephone Number
	t.			
Enclosed	is a check for t	the following amount:		
ॼ॔ \$25.0	0 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

KELLEY & FULTON

April 17, 2017

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

Re: IPpay, LLC Doc #: L17000064678

To Whom It May Concern:

Enclosed, please find the Articles of Amendment to Articles of Organization for IPpay, LLC as well as check number 6388 in the amount of \$25.00 made payable to "Florida Department of State" representing the filing fee.

Please do not hesitate to call the office should you need further information.

Very truly yours,

Craig I. Kelley

Craig I. Kelley For the Firm

CIK/cm

Enclosure



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Irpay, LLC	 		
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now as a Limited Liability Compa	opears on our records.) any)	
The Articles of Organization for this Limited Liability (Company were filed or	n 03/21/2017	and assigned
Florida document number L17000064678			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	nited liability compan	y here:	
			
The new name must be distinguishable and contain the words "Lim	nited Liability Company."	the designation "LLC" or t	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD)	RESS)		
_			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		 	
B. If amending the registered agent and/or registered agent and/or the new registered office add		s on our records, <u>en</u>	ter the name of the ne
Name of New Registered Agent:	·		
New Registered Office Address:		· .	
	Enter	r Florida street address	
	City	, Florida	Zip Code
New Registered Agent's Signature, if changing Registere	•		z.p couc
• • • • • • • • • • • • • • • • • • • •			
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and caccept the obligations of my position as registered a being filed to merely reflect a change in the registere company has been notified in writing of this change.	complete performanc gent as provided for ed office address, I h	e of my duties, and I of in Chapter 605, F.S. ereby confirm that the	am finitiar with and Or, FRis document is a limbal liability TARY OF PH
	If Changing Registere	ed Agent, Signature of New	v Registered Arent

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>	Address	Type of Action
MGR	William Kruer	1900 SE 15th Street	
		Fort Lauderdale, NY 33316	Remove
			□ Change
1GR	ConVergence Technologies, Inc.	2001 Broadway, Suite 200	⊟ Add
		Riviera Beach, FL 33401	□ Remove
			☐ Change
			Add
			Remove
			□ Change
			☐ Add
			Remove
			☐ Change
			17 SECRETARY SECRETARY TALLAHASSE
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			Change

						
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fective date, if other than the dan effective date is listed, the date must bute: If the date inserted in this blockument's effective date on the Department's	e specific and k does not m	cannot be prior to eet the applicat	o date of filing or	more than 90 days:	o ptional) after filing.) Pursu this date will n	ant to 605.0 ot be listed
record specifies a delayed e The 90th day after the recor	effective da d is filed.	ate, but not	an effective	time, at 12:0)1 a.m. on th	ie earliei
ted April 10		2017			₹s:	=
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	<i>MAS Dellu</i> gnature of a m	A KOCCO tember or author	ized representativ	e of a member	HASS	19 F
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Filing Fee: \$25.00