## 18000152072

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(B	Business Entity Nar	me)
(D	Ocument Number)	
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## **COVER LETTER**

	istration Section of Corp			
SUBJECT:	ICOI, I.I.C	·		
JOIA, LCT.	Name of Limited Liability Company  Articles of Amendment and fee(s) are submitted for filing.  all correspondence concerning this matter to the following:  STEPHANIE SAYRE  Name of Person  Firm/Company  230 BOUGAINVILLA STREET  Address  TAVERNIER, FL 33070  City/State and Zip Code  KEYLARGOFAMILY@YAHOO.COM  E-mail address: (to be used for future annual report notification)  formation concerning this matter, please call:  ARINEAU, ESQ.  Name of Person  Area Code  Daytime Telephone Number  check for the following amount:  ling Fee  \$\$55.00 Filing Fee & \$\$60.00 Filing Fee.			
The enclosed	f Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		STEPHANIE SAYRE		
			Name of Person	<del></del>
			Firm/Company	<del></del>
		230 BOUGAINVILLA ST	REET	
			Address	
		TAVERNIER, FL 33070		
		KEYLARGOFAMILY@Y		
		<del>-</del>		cation)
For further in	nformation co	ncerning this matter, please co	ıll:	
JOE A. CA	ΓARINEAU, Ι	ESQ.		
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	a check for the	e following amount:		
■ \$25.00 F	iling 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

ICOI, LLC	
( <u>Name of the Limited Liability Company as it</u> (A Florida Limited Liability	now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were a clorida document number L18000152072	filed on JUNE 21, 2018 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	ompany here:
The new name must be distinguishable and contain the words "Limited Liability Con	npany," the designation "LLC" or the abbreviation "L.L."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	<u> </u>
Enter new mailing address, if applicable:	M - 51
Mailing address MAY BE A POST OFFICE BOX)  ———————————————————————————————————	
B. If amending the registered agent and/or registered office a registered agent and/or the new registered office address here:	address on our records, <u>enter the name of the n</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = · Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	GUY SAYRE	230 BOUGAINVILLA STREET	🗆 Add
		TAVERNIER. FL 33070	Remove
			☐ Change
	-		
			Remove
			☐ Change
			□ Remove
			☐ Change
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				JUN 25	독류 교무교
				25	(C)
				<b>X</b>	— 종유 음음
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				57	i
		<u></u>			
ective date, if other than the date of	· filing		(a)	ptional)	
reffective date is listed, the date must be speci	fie and cannot be pri		or more than 90 days a	fter filing.) Pursuant to 6	
te: If the date inserted in this block does tument's effective date on the Departmen			filing requirements,	this date will not be I	isted a
timent y effective date on the 1245million	n or other steeds				
record specifies a delayed effect	ive date, but r	not an effectiv	ve time, at 12:0	1 a.m. on the ear	rlier o
The 90th day after the record is f			ic inner at acre		
JUNE 22	2018				
	77/				
			·		

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Typed or printed name of signee

Filing Fee: \$25.00