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AUG 1 1 2016 S. PRATHER

COVER LETTER

TO:

TO:		stration Se sion of Cor			
eno ic		Ironwood H	Home Inspections LLC		
SUBJECT:			Name of Lim	ited Liability Company	
The end	closed	Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please i	return :	all correspo	ndence concerning this matter	to the following:	
			Charles Kaplan		
				Name of Person	
			Ironwood Home Inspecti	ons LLC	
				Firm/Company	
			2705 NW 104th Avenue	# 101	
				Address	
			Sunrise Florida 33322		
			City/State and Zip Code		
			iinspectyournest@gmail.c	com to be used for future annual report notified	e T
For fur	thar in	firematica c	oncerning this matter, please ca		neactory
			oncerning this matter, prease ca		
Charle	s Kap	_		954 661-6130 at ()	
		Name o	f Person	Area Code Daytim	e Telephone Number
Enclose	ed is a	check for th	ne following amount:		
■ \$25	5.00 Fí	ling 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)
		Registr Divisio	ING ADDRESS: ation Section on of Corporations ox 6327	STREET/COURI Registration Section Division of Corpor Clifton Building	n

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ironwood Home Inspections LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited l	ny as it now appears on our records.) Liability Company)
he Articles of Organization for this Limited Liability Company lorida document number L18000178090	1 ,
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liab	ility company here:
Inspect Your Nest LLC	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	2705 NW 104th Avenue
Principal office address MUST BE A STREET ADDRESS)	#101
	Sunrise Florida 33322
nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	
o. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida

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, <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
			☐ Remove
			Change
			Add
		·	☐ Remove
			Change
••			
			Remove
			Change
			□ Remove
			Change
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			□ Remove
			Change
			
			□ Remove
			□ Change

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1900 A 3 A 6 A	8-2-2018
Effective date, if other t	han the date of filing: (optional) e date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)
Note: If the date inserted	in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
document's effective date	on the Department of State's records.
	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
The 90th day after	the record is filed.
August 2	2018
Dated A.	
111	$\Lambda (I) $
	Signature of a member or authorized representative of a member
Charles F Kar	olan '
-	Typed or printed name of signee

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Filing Fee: \$25.00