190000 15359

(Re	questor's Name)	
(Ad	dress)	_
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



100322848861

01/22/19--01013--024

**25.00

-2019-J#H-22-FH-4:-23

AMUND

LATRKLLOW

COVER LETTER

Div	ision of Corp	porations									
SUBJECT:	Invisible Do	or Holding Group, LLC									
Name of Limited Liability Company											
The enclosed	Articles of a	Amendment and fee(s) are sub	mitted for filing.								
Please return	all correspor	ndence concerning this matter	to the following:								
		C. Philip Insisiengmay									
			Name of Person	 -							
		Invisible Door Holding Gr	oup, LLC								
			Firm/Company								
		1995 Ganton CT									
			Address								
		Rockledge, FL 32955									
			City/State and Zip Code	···							
		pinsisiengmay@gmail.com E-mail address: 0	to be used for future annual report notifi	cation)							
For further in	nformation co	ncerning this matter, please ca		,							
C. Philip Ins	isiengmay		262 391-3644 at ()								
	Name of	Person	at () Area Code Daytime	Telephone Number							
Enclosed is a	check for the	e following amount:									
■ \$25.00 F	iling Fee	S30.00 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:

TO:

Registration Section

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**

Invisible Door Holding Group, LLC

2019 JAH 22 PH 4.23 (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 Comp	any were filed on January 14, 2019	and assigned
Florida document number L19000015359		
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 I	liability Company," the designation "LLC" or the	ne abbreviation "L.IC."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
B. If amending the registered agent and/or registered	d office address on our records, en	ter the name of the nev
registered agent and/or the new registered office address		
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 Age	ent:	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	lete performance of my duties, and La as provided for in Chapter 605, F.S. (im familiar with and Or, if this document is
īro	Changing Registered Agent, <u>Signature of Ne</u> v	Negistered 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>	Address	Type of Action
MGA	C. Philip Insisiengmay	1995 Ganton CT Rockledge, F1, 32955	■ Add
			Remove
		- 	Change
MGR	Phonthip Meno Insisiengmay	1995 Ganton CT Rockledge, FL 32955	
			Remove
			Change
MGR	Tanthai Bubphaphuang	50 Needle Blvd, Unit 15 Merritt Island FL 32953	■ Add
		·	Remove
			Change
·· · · · · · · · · · · · · · · · · · ·			
			Remove
			Change
	**		
			□ Remove
			Change
			DbbA 🗆
			□ Remove
			Change

												_			
															1
										- - -					-{
															1
				•											7
															-{
															-
					_				•	_					٦į
		<u>.</u>													_
						-							. —		
															_
							-								_
															_
															ı İ
					_			_							-1
													_		_
															-
															_
															-
															— İ
															•
								<u> </u>							_
00a.ia	daka ifak		- 4 5 a da	es of fill	:							(a:	15		- 1
<u>ote:</u> If th	date, if other date is listended the date insective.	erted in t	his block	does no	tineet	the app	licable	ate of fi	ling or i ory fili	nore tha	n 90 day irement	s after ti s, this c	ling.) Pu late wil	rsuant to t I not be I	605. 02 0 ist ed a
	d specifie Ith day al					, but	not a	n effe	ctive	time,	at 12	:01 a.	m. on	the ea	rlier
Jan	uary 17					019		,							
		(nature of	\sim	<u></u>									
			- 1 - 00			\checkmark	ب نسيطه				h				L
			C 218	nature of	a memi	per or at	morize	a repre	semany	coram	emper				

Page 3 of 3

Filing Fee: \$25.00