

L19000 032 448

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

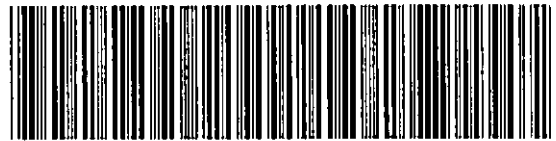
(Business Entity Name)

(Document Number)

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2019 NOV 22 PM 12:13
SEC. OF STATE
TALLAHASSEE, FL 32399-0000

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: IT DATA MINING 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:

Ian Stephen Hahn

Name of Person

IT DATA MINING LLC

Firm/Company

15917 SW 20th St

Address

Davie FL 33326

City/State and Zip Code

stephen@bitvestine.com

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

For further information concerning this matter, please call:

Ian Hahn

954 790-0909
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**

IT DATA MINING 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 01/31/2019 and assigned
Florida document number E19000032448

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:

15917 SW 20th St

(Principal office address MUST BE A STREET ADDRESS)

Davie FL 33326

Enter new mailing address, if applicable:

15917 SW 20th St

(Mailing address MAY BE A POST OFFICE BOX)

Davie FL 33326

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:

Ian Stephen Hahn

New Registered Office Address:

15917 SW 20th St

Enter Florida street address

Davie

Florida 33326

City

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>
MGR	Troy Houtman	9026 Long Lake Palm Dr	<input type="checkbox"/> Add
		Boca Raton FL 33496	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Mgr	Ian Stephen Hahn	15917 SW 20th St	<input checked="" type="checkbox"/> Add
		Davie FL 33326	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 11/20/17,

Signature of a member or authorized representative of a member

Troy Houtman
Typed or printed name of signer

Typed or printed name of signee