

L19 CCCCC 38845

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

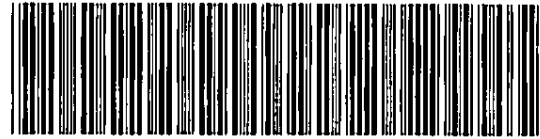
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300330597073

06/17/19--01010--024 **25.00

6/15/19

Amend

APPROVED
FALCON

COVER LETTER

**TO: Registration Section
Division of Corporations**

INNOVATIVE PAYROLL SERVICING, LLC

SUBJECT: _____
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:

Attn: Maria Lebron

Name of Person
INNOVATIVE PAYROLL SERVICING, LLC

Firm/Company
3956 Town Center Blvd. PMB117

Address
Orlando, FL 32837

City/State and Zip Code
Carlos.gregory@gmail.com

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

For further information concerning this matter, please call:

Maria Lebron

407 583-4537

Name of Person at (_____) _____
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | <input type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 27, 2019

INNOVATIVE PAYROLL SERVICING, LLC
ATTN: MARIA LEBRON
3956 TOWN CENTER BLVD PMB117
ORLANDO, FL 32837

SUBJECT: INNOVATIVE PAYROLL SERVICING, LLC
Ref. Number: L19000038845

We have received your document for INNOVATIVE PAYROLL SERVICING, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records show that the new registered agent listed name has changed and please list the complete name of the manager/member being added.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 619A00013055

REC'D
2019 AUG -5 PM 2:06

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

INNOVATIVE PAYROLL SERVICING, 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 February 07, 2019 and
Florida document number L19000038845.

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:

3956 Town Center Blvd. PMB 117

(Principal office address MUST BE A STREET ADDRESS)

Orlando, FL 32837

Enter new mailing address, if applicable:

3956 Town Center Blvd. PMB 117

(Mailing address MAY BE A POST OFFICE BOX)

Orlando, FL 32837

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:

Watson Sloane ~~LLC~~ PLLC Attn: Brian Watson

New Registered Office Address:

100 S. Orange Ave. Suite 1000

Enter Florida street address

Orlando

City

, Florida 32801

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 | Innovation Management | 3956 Town Center Blvd. PMB | |
| | <u>Innovation Management, LLC</u> | <u>117 Orlando, FL 32837</u> | <input checked="" type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AMBR | Gregory, Carlos | | |
| | | | <input type="checkbox"/> Add |
| | | 1385 W. SR. 434 Suite 205 | |
| | | Longwood, FL 32750 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AP | Lebron, Maria | | |
| | | | <input type="checkbox"/> Add |
| | | 1385 W. SR. 434 Suite 205 | |
| | | Longwood, FL 32750 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AMBR | Patel, Diepen Kumar | | |
| | | | <input type="checkbox"/> Add |
| | | 1385 W. SR. 434 Suite 205 | |
| | | Longwood, FL 32750 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AMBR | Rivera, Edivier | | |
| | | | <input type="checkbox"/> Add |
| | | 1385 W. SR. 434 Suite 205 | |
| | | Longwood, FL 32750 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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)

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.

May 9 2019

Carlos Gregory

Page 3 of 3

Filing Fee: \$25.00