

120000185121

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

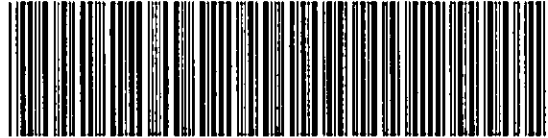
(Business Entity Name)

(Document Number)

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2021 APR 21 AM 11:27
TALLAHASSEE, FLORIDA

Cover Letter

To: Division of Corporation

This is a request for an agent name change from said, Byron K Braxton Jr to Byron K Braxton. Please contact me with any questions that you may have Regarding this letter.

Thank you

William Benjamin Jackson III MBR
11705 Boyette Rd STE 250
Riverview Fl, 33569
813.546.6713
intellinvestmentsolutions@gmail.com

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INTELLIGENT INVESTMENT SOLUTIONS 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:

William Benjamin Jackson III MBR
Name of Person

INTELLIGENT INVESTMENT SOLUTIONS LLC
Firm/Company

11705 Boyette Rd Ste 250
Address

RIVERVIEW, FL 33569
City/State and Zip Code

intelligentinvestmentsolutions@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PETE JACKSON III at (813) 546-6713
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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Intelligent Investment Solutions, 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 July 01, 2020 and assigned Florida document number L20000185121

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 "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

BYRON K BRAXTON

New Registered Office Address:

Enter Florida street address

Florida

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.

Byron K. Braxton

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	BYRON K BRAXTON	11705 11705 BOYETTE RD STE	<input type="checkbox"/> Add
		250 RIVERVIEW FL 33569	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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2021 APR 21 AM 11:27
TALLAHASSEE, FLORIDA

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2021 APR 21 AM 11:27
TALLAHASSEE, FLORIDA

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)

Dated _____.

Typed or printed name of signee

Filing Fee: \$25.00