L09000085646

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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Special Instructions to Filing Officer:

A. LUNT

JAN 21 2010

EXAMINER

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COVER LETTER

COVEREDITER
TO: Registration Section Division of Corporations
SUBJECT: Mattels and Company 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: CORTLAND Schulver
The enclosed Articles of Amendment and fee(s) are submitted for filing.
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:
CORTLAND Schulyer &
CORTLAND Schulyer BANGER Name of Person CORT'S HIGH Reach Sales Firm/Company
171 NW 13 ⁺ⁿ STREET Address
BOCA RATON, FL 33432 City/State and Zip Code Cow E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
CORTAND Schulyer at (561) 239 9220 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\sim \frac{1}{2}\$30.00 Filing Fee \$\sim \frac{1}{2}\$\$ Certificate of Status \$\sim \frac{1}{2}\$\$ Certified Copy (additional copy is enclosed) \$\sim \frac{1}{2}\$\$ 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

MATTEIS	& COMP	ANY, LLC	i 				
(Name of the Limited L (A F	iability Company as i Torida Limited Liability	t now appears on o	our records.				
(y company)	ī	7 ₀ 2			
The Articles of Organization for this Limited Liab	bility Company were	filed on <u>Scpt</u>	· 3, 200	and assign	ned		
Florida document number <u>L09000</u>	85646		:	N 19	F		
The Articles of Organization for this Limited Liab Florida document number <u>LO9000</u> This amendment is submitted to amend the follow	ving:		,	ဗြိမ္မ	ED		
A. If amending name, enter the new name of t	<u>he limited liability c</u>	ompany here:		32 REFE			
The new name must be distinguishable and end with	Reach Sa	les, Li		A			
The new name must be distinguishable and end with "L.L.C."	the words "Limited Lia	ability Company," t	ne designation "I	LC" or the abb	reviation		
Enter new principal offices address, if applicat	ole: <u>_/_7</u>	1/ NW /	3 57.				
(Principal office address MUST BE A STREET	ADDRESS)	oca Raji	ON, FL-	33432			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Be	<u>ox)</u>						
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:	CORTLA	NO Sc	hulye	R	<u></u>		
New Registered Office Address:	171 NW	13th 57					
Name of New Registered Agent: CORTLAND Schulyer							
	Boca P	aron	, Florida	<u>33432</u>	<u></u>		
	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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MG-RM	John Matters	29 SE 5 Street BOCA RAND FL 33432	•
M6RM	WRTLAND Schulyer	171 NW 13th STREET BOCK RUTON, FL 33432	Add Remove
			Add Remove
		Ar Carrier Arian A	Add ARemove
		SSEE, FLORIDA	Add
			Add Remove
D. If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
			-
Dated		·	<u></u>
ž	John J. Matter		
	Typed o	r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00