

L1000005855

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

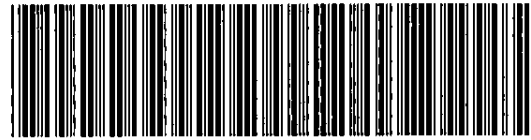
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON

NOV 18 2011

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FORWARD BRANDS, 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:

LUIS E. PEREZ
Name of Person

FORWARD BRANDS, LLC
Firm/Company

12605 NW 115 AVE SUITE 103
Address

MEDLEY, FL 33178
City/State and Zip Code

LUIS@FORWARDBRANDS.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NACHMAN ABRAHAM GLATZER at **(305) 514 0092**
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

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FORWARD BRANDS, LLC

(Name of the Limited Liability Company as it now appears on our records) OF ST. LE
(A Florida Limited Liability Company) TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 05/13/2010 and assigned
Florida document number L1000001855.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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)

12605 NW 115 AVE SUITE 103

MEDLEY, FL 33178

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:

New Registered Office Address:

12605 NW 115 AVE SUITE 103

Enter Florida street address

MEDLEY

Florida

33178

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>LUIS E. PEREZ</u>	<u>2574 SW 27th LANE COCONUT GROVE, FL 33133</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>P</u>	<u>LUIS E. PEREZ</u>	<u>12605 NW 115 AVE SUITE 103 MEDLEY, FL 33178</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGR</u>	<u>ABE GLATZER</u>	<u>2574 SW 27th LANE COCONUT GROVE, FL 33133</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>V</u>	<u>NACHMAN ABRAHAM GLATZER</u>	<u>12605 NW 115 AVE SUITE 103 MEDLEY, FL 33178</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

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 2011 NOV 15 AM 11:14
 CLERK OF STATE
 TALLAHASSEE, FLORIDA

Dated 11/4/11 NOVEMBER 2011.

 Signature of a member or authorized representative of a member
LUIS E. PEREZ

 Typed or printed name of signee