L12000078462

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J. SAULSBERRY EXAMINER JUN **21** 2012

COVER LETTER

Registration Section

TO:

Division of Corporations
SUBJECT: 2 Extra Handz 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:
Spencer C. Blank Name of Person 2 Extra Handz LLC
Firm/Company 17320 Loch lomond Way Address
Boca Raton Florida 33496 City/State and Zip Code Seen Cer BO13 & mail. com Ismail address: (to be used for future annual report notification) For further information concerning this matter, please call: Seen Cer C. Blank at (561) 322 0604
For further information concerning this matter, please call:
Spencer C. Blank at (561) 322 0604 Prince 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 & Certificate of Status & Certified Copy (additional copy is enclosed) \$25.00 Filing Fee & S60.00 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

_ 2 Extra Han	dZ			
(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 Florida document number <u>L1200078462</u> .	were filed on June 13,7012 and assigned			
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 "Limit "L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation			
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	17320 loch lomond Way Bora Raton FL, 33496			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	17320 loch lomond way Boca Raton FL, 33496			
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent:				
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 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Spencer C. Blank	17320 loch lomand Way Boca Raton FL, 33496	Add Remove
MGRM	Michael MCEormick	6573 NW 39th Terrace Boco Rater FL, 33496	Add Remove
MGRM	Jerome Bianco	3139 millwood Ferrace apt M132 Boca Raton FL, 33431	Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendi		s) here: (Attach additional sheets, if necessary.)	FILED 2812 JUN 20 AH 9: 34 SECRETARY OF STATE
	filled out the paper	Work Incorrectly Online	SSEE SSEE
<u>ي</u>	o I wanted to have	re it corrected please. (spencer Blank) Manager and	FS ₹ [T]
	would like to put	me as the Monager and	ORIA 9. CI
R	emove Michael McC	ornick and Dereme Blan	CO.
_5	o it should be setu	p as a single member L	TC with spencerci
Dated Jun	18,2012, MA	p as a single member L	as the ownersingle
-	Signature of a member o	r authorized representative of a member	. <u> </u>
-	Typed or	Spencer C. Blank printed name of signee	
	, ,	Page 2 of 2	

Filing Fee: \$25.00