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(Re	questor's Name)	
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## **COVER LETTER**

	Division of Corp	porations			
SUBJEC	CT: TooJay's C	of Lake Mary, LLC	And Distribution Commence		
		Name of Lim	ited Liability Company		
The encl	osed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn all correspor	ndence concerning this matter	to the following:		
r rouse re	turn an correspon	idence concerning this matter	to the following.		
		Tracy Esposito	A Ch		
			Name of Person		
		TooJay's Of Lake Mary,	LLC		
		<del></del>	Firm/Company		
		3654 Georgia Avenue	Address		
			Address		
		West Palm Beach, FL 33	3405		
		· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	2016	•
		tracy.esposito@TOOJAY	'S.com	AUG.	
		E-mail address: (1	to be used for future annual report notific	cation)	
For furth	er information co	ncerning this matter, please ca	all:	D	
				university of the second secon	
Jaymee	Bearden		at (850 ) 577-9090		
	Name of	Person	Area Code Daytime	Telephone Number	
Enclosed	is a check for the	e following amount:			
<b>■</b> \$25.0	00 Filing Fee	□ \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	□ \$60.00 Filing Fee,	,
		Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy	Z
			• • • • • • • • • • • • • • • • • • • •	(additional copy is enclose	d)

MAILING ADDRESS:

TO:

**Registration Section** 

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

TooJay's Of Lake Mary, LLC			
(Name of the Limi	ted Liability Compa (A Florida Limited	nny as it now appears on Liability Company)	our records.)
	(		
The Articles of Organization for this Limited L	iability Company	were filed on	07/18/2000 and assigned
Florida document number L00000000624	<del></del> ,		
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here:	
N/A			
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the design	ation "LLC" or the abbreviation "L.L C."
Enter new principal offices address, if applic	able:	N/A	
(Principal office address MUST BE A STREE	T ADDRESS)		
			_' <del></del>
			(3)
F		NUA	1
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)			
			······································
			0
B. If amending the registered agent and			records, enter the name of the new
registered agent and/or the new registered of	fice address her	<u>e</u> :	
	NA		
Name of New Registered Agent:	11/1		
New Registered Office Address:			
New Registered Office Address.		Enter Florida st	reet address
			File of the
		City	, Florida 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>	Address	Type of Action
AMBR	TooJay's Management, LLC	3654 Georgia Ave., W. Palm Bch, FL 33405	
			<b>∠</b> Remove
			□ Change
MGR	Christopher J. Artinian	52 Paddington Road, Scarsdale, NY 10583	
		No Change.	□ Remove
		· · ·	□ Change
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	ctive date, if other than the date of filing:	
E. Effe	effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pur e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will	rsuant to 605.0207 not be listed as
(If an Not	iment's effective date on the Department of State's records.	
(If an <u>Not</u> doci	iment's effective date on the Department of State's records.  Tecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 90th day after the record is filed.	the earlier of
(If an <u>Note</u> doct If the r (b) Th	iment's effective date on the Department of State's records.  Tecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the specifies and the specifies are specified as the specifies and the specifies are specified as the specifies are specified as the specifies are specified as the specified as	the earlier of

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Typed or printed name of signee

Filing Fee: \$25.00