## L03000021507

| (Re                                     | equestor's Name)  |             |
|---|-------------------|-------------|
| · . (Ac                                 | ldress)           |             |
| (Ac                                     | idress)           |             |
| ; (Ci                                   | ty/State/Zip/Phon | e #)        |
| PICK-UP                                 | MAIT              | MAIL        |
| (Bi                                     | usiness Entity Na | me)         |
| (Do                                     | ocument Number)   |             |
| Certified Copies                        | _ Certificate     | s of Status |
| Special Instructions to Filing Officer: |                   |             |
|   |                   |             |
|   |                   |             |
| ·                                       |                   |             |
|   | Office Use Or     |             |



800234655628

05/07/12--01033--013 \*\*655.00

05/17/12--01009--002 \*\*25.00

PILED 2012 MAY 16 PM 2: 55 SECRETARY OF STATE

J. BRYAN
MAY 1 7 2012

**EXAMINER** 

## **COVER LETTER**

| O: Registration Section Division of Corporations   |
|--|
| SUBJECT: TWB, L.L.C.   |
| 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:  |
| Joseph W. Baker<br>Name of Person  |
|  |
| The Awards Store, INC.   |
| Firm/Company   |
| 736 North Mills Avenue 2000年   |
| Address  Orlando, Florida 32803  City/State and Zip Code   |
| City/State and Zip Code  |
| into a theawards fore. net   |
| E-mail address: (to be used for future annual report notification)   |
| For further information concerning this matter, please call:   |
| Name of Person at 407 894-84// Area Code & Daytime Telephone Number  |
| Alea 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, 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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

May 10, 2012

JOSEPH W. BAKER THE AWARDS STORE, INC. 736 NORTH MILLS AVENUE ORLANDO, FL 32803

SUBJECT: JWB, L.L.C. Ref. Number: L03000021507



We have received your document for JWB, L.L.C. and your check(s) totaling \$655.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$25.00.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." andthe word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

The document number of the name conflict is #A9400000192, S.F.R., LTD...

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Joey Bryan

Regulatory Specialist II

Letter Number: 112A00014008



## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| ) (  | JBLL.C.   | ·  |
|--|---|--|
| ( <u>Name of the Limited Liab</u> l<br>(A Floric       | lity Company as it now appears on o da Limited Liability Company) | ur records.)                             |
|  | c = 11  | 1-111                                    |
| The Articles of Organization for this Limited Liabilit | y Company were filed on 6 70                                      | and assigned                             |
| Florida document number <u>LO30000</u> 2               | <u>15</u> .07   |  |
|  |   |  |
| This amendment is submitted to amend the following     | r:  | 70, 12                                   |
| , , , , , , , , , , , , , , , , , , ,                  | ,   | \$ 5 S                                   |
| A. If amending name, enter the new name of the         | imited liability company here:                                    | <b>E</b> rr                              |
| Joseph ()  | Roker: 110  |  |
| The new name must be distinguishable and end with the  | words "Limited Liability Company," tl                             | ne designation "LLC" or the abbreviation |
| "L.L.C."   |   |  |
| Enter new principal offices address, if applicable:    | <u> </u>  |  |
| (Principal office address MUST BE A STREET AL          | DDRESS)   |  |
|  |   |  |
|  |   |  |
|  |   |  |
| Enter new mailing address, if applicable:              |   |  |
| (Mailing address MAY BE A POST OFFICE BOX              | 2   |  |
|  | · .   | <u> </u>                                 |
|  |   |  |
| B. If amending the registered agent and/or re          |   | ecords, enter the name of the new        |
| registered agent and/or the new registered office      | address here:   |  |
|  | •   |  |
| Name of New Registered Agent:                          |   |  |
| New Business of Office Address                         |   |  |
| New Registered Office Address:                         | Enter F   | lorida street address                    |
|  | Line 1 wi was seet wan ess  |  |
|  |   | , 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member Type of Action <u>Title</u> Name | **Address** \_ Add 🔲 Remove 🧉 ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Typed or printed name of signee

Page 2 of 2

10seph

Filing Fee: \$25.00

ignature of a member or authorized representative of a member