(04000011322

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SECHENAY OF STATE

04-11322 A FROM: DOLLAR PLUS BARGAINS LLC 2750. E. ATLANTIC. BLUD POMPANO BCH FL-33062 arti Pandya 111 Bring Ave # 910 Pompono Bd Ft. 33062 8/23/04.

Re: Change & Registered Agent

Dear Sirl Madam:

Please Change the name of Registered Njent from Thacker Vibba to new agent "ARTI PANDYA".

Enclosed is the check & the forms biling new registered agent.

DIL SEP ID PH 4: 24

SECREPATE OF SIME

Thonking you,
Sincerely,
Apandya
(artic pandya)



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 27, 2004

ARTI PANDYA 111 BRING AVENUE #910 POMPANO BEACH, FL 33062

SUBJECT: DOLLAR PLUS BARGAINS, LLC

Ref. Number: L04000011322

We have received your document for DOLLAR PLUS BARGAINS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6020.

Tammi Cline **Document Specialist**

Letter Number: 904A00052385

TRANSMITTÄL LETTER

	tion Section of Corporations	
SUBJECT:	DOLLAR PLUS BARGAINS, LLC (Name of Limited Liability Company)	
The enclosed Arti	icles of Organization and fee(s) are submitted for filing.	
	Please return all correspondence concerning this matter to the following:	
_	ARTI PANDYA (Name of Person)	
-	(Name of Person)	
	DOLLAR PLUS BARGAINS LLC. (Firm/Company)	
	2750 · E · ATLANTIC BLUD (Address)	
	` ,	
-	Pompano Beach, FL-33062 (City/State and Zip Code)	
	(City/State and Zip Code)	
For further information concerning this matter, please call:		
	I PAN DYA at (954) 854-9991 (Name of Person) (Area Code & Daytime Telephone Number)	

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: DOLLAR PLUS BARGAINS, LLC
2. The mailing address of the limited liability company is: 2750 · E · ATLANTIC BLVD
POMPANO BEACIL, FL-33062
POMPANO BEACIL, FL-33062 02/04/2004 L04000011322
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
THACKER VIBBA Name 2750·E·ATLANTIC BLVD Address Pompano BEACH FL-33062 City, State and Zip
Name
2750.E. ATLANTIC BLUD
Pompano BEA (H FL-330/2
City, State and Zip
e mil 1 11 0.1 1 1 1 00
PANDYA, ARTI Name Name 12750·E·ATLANTIC BLvD Florida street address (P.O. Box NOT acceptable) Pompano BEACH FL 33062
PANDYA, ARTI
Name 2.750 · E · ATLANTIC BLUD Florido atrasta del cos (R.O. Por NOT accentable)
Florida street address (P.O. Box NOT acceptable)
POMPANO BEACH FL 33062
City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.
Apanlya
(Signature of a member or authorized representative of a member)
ARTI PANDYA
(Printed or typed name of signce)
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.
(Signature of Registered Agent)
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