LULULU3331

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT: Ink &	Toner USA, L	.LC		
	Name of Lim	ited Liability Company		
	mendment and fee(s) are sub	-		
	Jane C. Bloo	om		
		Name of Person		
	Terios, LLC			
		Firm/Company		
	550 Okeech	obee Blvd., Apt	. 1513	
		Address		
	West Palm I	Beach, FL 3340)1	
. •		City/State and Zip Code		
•	jcb720z@yahoo.	COM to be used for future annual report not	····································	erre erre
For further information co	ncerning this matter, please c	•		
Jane C. Blo	om	_{at} 561, 762-0		Jan.
Name of	Person	Area Code Daytin	ne Telephone Number	
1 mg	<i>1</i> 4			
Enclosed is a check for the	e following amount:			
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status &	

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy (additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ink & Toner USA, LLC		
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our a Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability (Florida document number L0400013331	Company were filed on Februar	y 10, 2004 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
Terios, LLC		
The new name must be distinguishable and end with the words "L	imited Liability Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
		<u> </u>
		SO
Enter new mailing address if applicables		က္တာ က ု က္သြ
Enter new mailing address, if applicable:		S L
(Mailing address MAY BE A POST OFFICE BOX)		2 × × ×
		<u> </u>
B. If amending the registered agent and/or regi registered agent and/or the new registered office add		ecords, <u>enter the name of the new</u>
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 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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member			
<u>Title</u>	<u>Name</u>	Address	Type of Action
		 	Add
			Remove
			Add
			Remove
			Remove
			Add
			Remove
			Addition of the second of the
			☐ Remove
			Add
			□ Remove

) .	If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	٠	
). (The eff	tive date, if other than the date of filing:
	Dated	September 28 2014
		Jane C. Bloom
		Signature of a member or authorized representative of a member Jane C. Bloom
		Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

