

206000086803

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

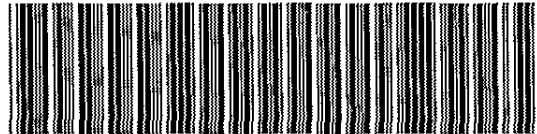
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900078988299

09/06/06--01023--004 **25.00

FILED

06 SEP -6 PM 2:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

2008 SEP -6 AM 11:49

ALL INFORMATION
TO BE MAINTAINED
TO AVOID
SUFFICIENCY OF FILING

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Time Zone International LLC

FILED
06 SEP -6 PM 2:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- ___ Art of Inc. File _____
- ___ LTD Partnership File _____
- ___ Foreign Corp. File _____
- ___ L.C. File _____
- ___ Fictitious Name File _____
- ___ Trade/Service Mark _____
- ___ Merger File _____
- ☒ Art. of Amend. File *LC* _____
- ___ RA Resignation _____
- ___ Dissolution / Withdrawal _____
- ___ Annual Report / Reinstatement _____
- ___ Cert. Copy _____
- ☒ Photo Copy _____
- ___ Certificate of Good Standing _____
- ___ Certificate of Status _____
- ___ Certificate of Fictitious Name _____
- ___ Corp Record Search _____
- ___ Officer Search _____
- ___ Fictitious Search _____
- ___ Fictitious Owner Search _____
- ___ Vehicle Search _____
- ___ Driving Record _____
- ___ UCC 1 or 3 File _____
- ___ UCC 11 Search _____
- ___ UCC 11 Retrieval _____
- ___ Courier _____

Signature _____

Requested by: *WL*

Name _____

Date *6/9*

Time *11:00*

Walk-In _____

Will Pick Up _____

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

TIME ZONE INTERNATIONAL LLC

(Present Name)
(A Florida Limited Liability Company)

FILED
06 SEP -6 PM 2:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The date of filing of the articles of organization was 9-1-06

SECOND: The following amendment(s) to the articles of organization was/were adopted by the limited liability company:

ADD SCARLETT J. VITA AS MANAGER

ADDRESS: PO BOX 1730

TARPON SPRINGS, FL. 34688

Dated 9-5-06

SCARLETT J. VITA

Signature of a member or authorized representative of a member

SCARLETT J. VITA

Typed or printed name of signer

Filing Fee: \$25.00