L07000080024

•	
(Requestor's Name)	
(Address)	
(Address)	,
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(, J,	
(Document Number)	
Certified Copies Certificates of Statu	ıs
Special Instructions to Filing Officer:	





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OR MOV 17 PM 3: 19

J. BRYAN

NOV 1 8 2008

EXAMINER

· November 12, 2008

Florida Department of State Division of Corporations

Re: Corporation Name Amendment

I am changing my LLC name from TJ's Naughty Toy Chest, LLC to TJ's Internet Outlet. I can be reached at (954)673-3002(Tiffany) or (954)305-7599(William). My return address is 6445 Charleston Street, Hollywood, FL 33024. Thank you.

Very truly yours

Tiffany D. Shagam

CHAISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: TJ'S Naughty Toy Chest, LLC (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:						
Tiffany D. Shagam						
TJ's Naughty Toy Chest, LLC (Firm/Company)	S S S S S S S S S S S S S S S S S S S					
6445 Charleston Street (Address)	THE COLUMN					
Holly wood, FL 33024 (City/State and Zip Code)	Cof SIATENS ORPORATIONS PH 3: 19					
For further information concerning this matter, please call:						
Tiffany D. Shagam at (954) 673-3002 (Area Code & Daytime Telephone Number)						
Enclosed is a check for the following amount:						
\$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

. Name of the Limited Liability Companies (A Florida Limited L	Chest, LLC	ecords.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 0700080024</u> .	^	بن عبر بن عبر بن عبر بن عبر بن عبر بن عبر بن بن عبر بن
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
TJ'S Internet Outlet, L. The new name must be distinguishable and end with the words "Limi"L.L.C."	LC ted Liability Company," the de	signation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	6445 Charlest	on Street
(Principal office address MUST BE A STREET ADDRESS)	Hollywood, Fr	33024
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10445 Charles- Hollywood, FL	ton Street 33024
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	(Enter Florid	la 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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
marm	Tiffany .D. Shagam	1445 Charleston Street Hollywood, FL 33024	Add Remove
			Add Remove
D. If amend	ding any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	Remove SECRETARY OF STATE OR VISION OF CORPORATIONS
Dated NO	vember 12 , 200	⊃ ४	
		or authorized representative of a member Or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00