

L07000085105

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

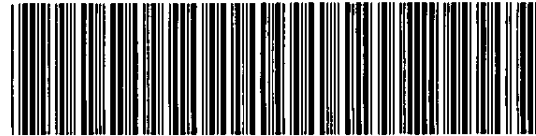
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/26/15--01001--002 **625.00

RECEIVED
15 MAY 22 PM 2:54
DIVISION OF CORPORATIONS

FILED
15 MAY 22 PM 12:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 26 2015

T. BROWN

GRAY ROBINSON
ATTORNEYS AT LAW

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May 22, 2015

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

Re: Articles of Amendment to Articles of Organization

Dear Sir or Madame:

Please see the enclosed check number 412651 in the amount of \$625.00 and applications for twenty-five (25) Article of Amendment to Articles of Organization for the following LLCs:

- TooJay's Lake Worth, LLC
- TooJay's Jupiter, LLC
- TooJay's Polo, LLC
- TooJay's Stuart, LLC
- TooJay's Altamonte, LLC
- TooJay's Of West Boca, LLC
- TooJay's Colonial, LLC
- TooJay's At Dr. Phillips, LLC
- TooJay's Vero, LLC
- TooJay's of Lake Mary, LLC
- TooJay's Waterford Lakes, LLC
- TooJay's Tampa, LLC
- TooJay's Wellington Green, LLC
- TooJay's Coral Springs, LLC
- TooJay's Of Sarasota, LLC
- TooJay's Plantation, LLC
- TooJay's Glades, LLC
- TooJay's Of The Villages, LLC
- TooJay's Downtown Gardens, LLC
- TooJay's VLG II, LLC
- TooJay's Boynton Beach, LLC
- TooJay's Ocoee, LLC
- TooJay's Melbourne, LLC
- TooJay's Of Lakeland, LLC
- TooJay's Downtown Tampa, LLC

Please make note of the change in name of the AMBR which was previously the MBRM TooJay's Management Corporation is now **TooJay's Management, LLC** with no change in address as a result of a corporate conversion. Let me know if you have any questions or need any additional information.

Sincerely,

Jaymee A. Bearden
Licensing Specialist

/jab
Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TooJay's Ocoee, 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:

Tracy Esposito

Name of Person

TooJay's Ocoee, LLC

Firm/Company

3654 Georgia Avenue

Address

West Palm Beach, FL 33405

City/State and Zip Code

tracye@toojays.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jaymee Bearden

Name of Person

at (850) 577-9090

Area 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,
Certificate of Status &
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

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
records.)
and assist

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	TooJay's Management, LLC	No Change in address.	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	James Vinz	3222 Embassy Dr. W. Palm Beach, FL 33401	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Scott Neitschmann	5401 W. Leitner Dr., Coral Springs, FL 33067	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

N/A

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated

May 20, 2015

Signature of a member or authorized representative of a member

James Vinz

Typed or printed name of signee