# 7000123669

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(Re	equestor's Name)			
(Ac	ddress)			
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(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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T. CLINE

JAN 15 2008

**EXAMINER** 

W7-123669

# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: JGLT Entereses Inc. 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:	
Jeffrey Alan Toothman (Name of Person)	
SLT Enterprises Inc (Firm/Company)	
11961 Sheldon Rd Soute 1841 (Address)	
Tampa FL 33626 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Jeff Toethman at (813) 926-7526 AFF AND	Press
Enclosed is a check for the following amount:	i J
\$25.00 Filing Fee \$\ \text{S25.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$\ \text{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 Co	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Com	pany were filed on	and assigned
Florida document number 67000133669.		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
Suncoast Shirts ILC.		
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Company," the designation "	LLC" or the abbreviation
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		the name of the new
		15-20 C. *******
		AN IN
Name of New Registered Agent:		m
New Registered Office Address:		PAR PAR
	(Enter Florida street aa	
	, Florida	Z2 IDA
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Reg	zent:	

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 I = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
<u> </u>			Add Remove
	<u>.</u>		Add Remove
D. If ar	nending any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	2008 JAN 14 PM SECRETARY OF TALLAH & SSEE
		-	4 PHI2: 22
Dated	January 14 200t	Turk	_
	Signature of a member	r or authorized representative of a member	
	Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00