Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000123374 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

Account Name : GRAYROBINSON, P.A. - ORLANDO

Account Number : 120010000078

Phone : (407)843-8880

Fax Number : (407)244-5690

the email address for this business entity to be used for future Shoual report mailings. Enter only one email address please.**

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TOOJAY'S PALM BEACH, L.L.C.

ى دوران الايوم بايار الدين بايوران ويرب السود قبالة اليوم بالواري بعال السين عمر	
Certificate of Status	0
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Estimated Charge	\$25.00



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- -- NO. 0690-P. 2-

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: TooJay's P.		ted Liability Company	
The enclosed Articles of A	mendment and leo(s) are subt	nitted for filing.	
Please return all correspon	dence concerning this matter t	to the following:	
		Tracy Esposito	
	**************************************	Name of Person	<u></u>
	TooJay's Palm Beach, L		
		Firm/Company	
	3654 Georgia Avenue	- <u> </u>	
		Address	
	West Palm Beach, FL 33		
	e.	City/State and Zip Code	
		acye@toolays.com o be used for future sunual report notifi	Cat On)
For further information co	ncerning this matter, please ca	uli:	
Jaymee Bearden Name of	Person	at (850) 577-9090 Area Codo Daytine	Telephone Number
		ŕ	
Enclosed is a check for the	following amount:		
\$25,00 Filing Fee	☐ \$30.00 Filing Fee & Cordficate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is smalased)	\$\omega\$ \$60.00 Fiting 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 MAY, 21. 2015 12:30PM

FILED

\$812 HVA 5 H1 200 080 080 3

ARTICLES OF AMENDMENT TO SECRETARY OF STATE ARTICLES OF ORGANIZATION TALL'AHASSEE, FLORIDA OF

TooJay's Palm Beach, LLC			
(Saine of the Limite	4 Liability Compan A Florida Limited Li	y as I now appears on our records.)	
·		-, -, -, -, -, -, -, -, -, -, -, -, -, -	
The Articles of Organization for this Limited Lie	bility Company v	vere filed on 12/18/2007	and assigned
Florida document number L07000125251			
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of	the limited liabil	ity company here:	
N/A			
The new name must be distinguishable and contain the wo	rds "Limited Liabilit	y Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	N/A	
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE B	OX)		
B. If amending the registered agent and/or registered agent and/or the new registered off	registered off for address have	ice address on our records, <u>er</u>	iter the name of the new
teratered agent andror the dew recities of our	CC BUILTESS DELE	l	
Name of New Registered Agent:	N/A		
			
New Registered Office Address:		Enter Florida street address	
		Thirt Lifter met metical	
		City, Florid:	R Zip Code
		City	ZIP COUR

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.

N/A
If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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MAY. 21. 2015 12:30PM

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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

Title	Name	Address	Type of Action
AMBR	TooJay's Management, LLC	No Change, same as currently listed.	
			D Remove
			[] Change
MGR	James Vinz	3222 Embassy Dr., W. Palm Bch, FL 33401	⊼ī Add
			□ Remove
,			Change
MGR	Scott Neitschmann	5401 W. Leitner Dr., Coral Springs, FL 33067	⊠ Add
			□ Remove
			Change
			🖸 Add
			C Remove
			Change
			D Add
			Remove
			Change
			🖸 Add
			_D Remove
			_D Change

. Z1. Z(15 12:30PM	0002040	3
D ##		10002040	3
D, 11	amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
	N/A_	···	
			-
			SAIS MAY
		三 清	=
		55	~
			_
			\geq
		FLORIDA	άò
		東西	20
			
		Pr	
E. El	fective date, if other than the date of filting: (optional) In 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 we	o 605.0207 (3)	(b)
N.	ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be curnent's effective date on the Department of State's records.	; listed as the	†
	•		
If the	record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the e	arlier of:	
(p)	The 90th day after the record is filed.		
	2016		
D	sted // Ay do		
	Signature and frember or sultarrised representative of a member	₹ #-	
	James Vinz Typed or printed name of signing		

Filing Fee: \$25.00

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