## 107000125253

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
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SECRETARY OF STATE

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Division of Corpo				
SUBJECT: TooJay's Bal	kery and Commissary, LLC			
	Name of Limited Liability Company			
The enclosed Articles of An	nendment and fee(s) are submitted for filing.			
Please return all correspond	ence concerning this matter to the following:			
	Tracy Esposito			
	Name of Person	•		
	TooJay's Bakery and Commissary, LLC			
	Firm/Company			
	3654 Georgia Avenue	,		
	Address	TATE 38	ಕ	
	West Palm Beach, FL 33405	ESE SE	AUG	71
	City/State and Zip Code	SS	င်္သ	ILED
	tracy.esposito@TOOJAYS.com		w	П
	E-mail address: (to be used for future annual report notification)	1100		
For further information cond	cerning this matter, please call:	ORIDA	& 53	
Jaymee Bearden	at (850 ) 577-9090			
Name of Po	erson Area Code Daytime Telephone Number			
Enclosed is a check for the t	following amount:			

□ \$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

□ \$30.00 Filing Fee &

Certificate of Status

**≥** \$25.00 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## STREET/COURIER ADDRESS:

□ \$60.00 Filing Fee,

Certificate of Status &

Certified Copy (additional copy is enclosed)

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TooJay's Bakery and Commiss	ary, LLC	Company as it now appears on our race	ande )
(Name of the Lini	(A Florida Lir	Company as it now appears on our reconited Liability Company)	<u>s us. )</u>
The Articles of Organization for this Limited I	Liability Com	pany were filed on12/18/2007	and assigned
Florida document number L07000125253			
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited	l liability company here:	
N/A			
The new name must be distinguishable and contain the	words "Limited	Liability Company," the designation "Ll	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	N/A	
Principal office address MUST BE A STRE	ET ADDRES	<u></u>	
			TAT SE 33
			CRI
Enter new mailing address, if applicable:		N/A	AHA:
(Mailing address MAY BE A POST OFFICE BOX)			SHAN -3 II
			G → ∞
B. If amending the registered agent and			ds, enter the name of the new
registered agent and/or the new registered o	office address	s here:	- 44
Name of New Registered Agent:	NA		
New Registered Office Address:			
- THE STATE OF THE		Enter Florida street addi	ress
		1	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 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.

If Changing Registered Agent, Signature of New Registered Agent

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>	Address	Type of Action
AMBR	TooJay's Management, LLC	3654 Georgia Ave., W. Palm Bch, FL 33405	Add
			<b>☑</b> Remove
			Change
MGR	Christopher J. Artinian	52 Paddington Road, Scarsdale, NY 10583	Add
		No Change.	Remove
			☐ Change
			Add
		· · · · · · · · · · · · · · · · · · ·	Remove
			FILE ANASSEE
			-3d MI 8853 RY OF STATE SSEE FLORIDA
			□ Change
			□ Add
			☐ Remove
			Change
<del></del>			Add
			☐ Remove
			Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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If an effe Note:	ve date, if other than the date of filing:  (optional)  cetive 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.	7 (3 s th
he rec The	ord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier o $90$ th day after the record is filed.	f:
Dated _	8/1/2016	
	Signature of a member or authorised representative of a member	
	Christopher J. Artinian	
	Typed or printed name of signee	

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Filing Fee: \$25.00