LORODOISIUI

(Requestor's Name)				
- (Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
L. SELLERS				
AUG 1 2 2009				

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EXAMINER



500159212295

08/10/09--01035--016 **25.00

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O9 AUG 10 AN ID: 22

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT:	Mrs.	Claus' LLC			
Sobject.	Name of Limited Liability Company				
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	oondence concerning this matter	to the following:	•		
		Tanya Coldren Name of Person			
ranic of Ferson					
Mrs. Claus' LLC					
Firm/Company					
801 Maplewood Drive, Suite 18					
	Address				
lunitos El 22459					
	Jupiter, FL 33458 City/State and Zip Code				
	TDC	DLDREN1@bellsouth.net			
	E-mail address: (to be used for future annual report not	ification)		
For further information	concerning this matter, please of	call:	•		
т	anya Coldren	at (561)	743-7915		
	of Person		me 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 enclose	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Regis	LING ADDRESS: stration Section sion of Corporations	STREET/COUR Registration Sect Division of Corp			
P.O. Box 6327		Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mrs. Claus' LLC
(Name of the Limited Liability Company as It now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on and assigned and assigned
Florida document numberL08000018161
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
B. If amending the registered agent and/or registered office address on our records, enter the name of the ne registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
City Florida City
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 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

چې څښتا

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Dennis Dempsey	5901 Tidewater Drive Jupiter, FL 33458	Add Remove
			Add Remove
			Add Remove
	· · · · · · · · · · · · · · · · · · ·		Add Remove
		· · · · · · · · · · · · · · · · · · ·	Add Remove
			AddRemove
D. If amend	ling any other information, enter	change(s) here: (Attach additional sheets, if nece	essary.)
			
_			99 AUG SECRED
Dated	August 1 ,	2009. Fanya Coldren	ARY SSE
	Signature of a	member or authorized representative of a member Tanya Coldren Typed or printed name of signee	AM D: 22 OF STATE EFFLORIDA

Page 2 of 2

Filing Fee: \$25.00