## Division of Corporations Electronic Filing Cover Sheet

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.

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To:		<b>&gt;</b> = ' '
	Division of Corporations	ARY SSE
	Fax Number : (850) 617-6383	<u>m</u> -< -
		프루 클
From:		
	Account Name : CSH SERVICES, LLC	101 125
	Account Number : 120070000160	**************************************
	Phone : (800)494-3124	THE PARTY IN
	Fax Number : (561)455-9885	. مستر

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

Email	Address:	
	•	

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

## BOUNCE HOUSE AND MORE L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

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**EXAMINER** 



ectronic Filing Menu

Corporate Filing Menu

Help

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		AND MORE L.L				
(Name of the Limited	Liability Comps Florida Limited	ny as it now app Liability Company	ears on our records.)			
The Articles of Organization for this Limited L	iability Company	were filed on _	09/22/2008	and a	ssigned	
Florida document numberL08000090284	·					
This amendment is submitted to amend the following	owing:					
A. If amending name, enter the new name of	the limited list	oility company h	<u>ere</u> :	TALLA	は記し	ج برات الأ
The new name must be distinguishable and end wit "L.L.C."	th the words "Lim	ited Liability Con	pany," the designation	"LLC's or the	abbrevia	ition
Enter new principal offices address, if applic	273 NW 80TH	H AVENUE	mg.	36		
(Principal office address MUST BE A STREET ADDRE		MARGATE, F	LORIDA 33063	70		
				RELEGIE	2	_
Enter new mailing address, if applicable:		273 NW 80T	H AVENUE	יעי 	_	
(Mailing address MAY BE A POST OFFICE BOX)		MARGATE, F	LORIDA 33063			_
B. If amending the registered agent and/or the new registered of	fice address her	<u>e</u> :	our records, enter	the name	of the 1	new
Name of New Registered Agent: SHEILA CORONA						
New Registered Office Address: 273 NW 80TH AVENUE				<del></del>		_
		(	Ent <mark>er Florida street</mark> a	iddress)		
	MARGATE	· · · · · · · · · · · · · · · · · · ·	, Florida _	33063		
		(City)		(Zip Co	de)	
New Registered Agent's Signature, if changing R	legistered 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 Changing Registered Agent, Signature of New Registered Agent)

Page 1 of 2

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If amen or Man	ding the Managers or Managing Me aging Member being added or remov	embers on our records, enter the title, name, are red from our records:	nd address of each Manager 8/72910-3
	: Manager I = Managing Member	7	, <u> </u>
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	TARA SPENCER	5280 NW 95TH AVENUE CORAL SPRINGS, FLORIDA 33076	Add Remove
MGR	SHEILA CORONA	273 NW 80TH AVENUE MARGATE, FLORIDA 33063	Add Remove
			SE GAdd FRemove
<del></del> ,			Remove 10
			Add Remove
			Add Remove
D. If an	mending any other information, enter	r change(s) here: (Attach additional sheets, if nec	essary.)
Dated _	JULY 29	2010	
	Signature of a	member of authorized representative of a member	
		Shella Corona Typed or printed name of signae	

Page 2 of 2

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