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S. HAWKES
FEB 8 - 2010
EXAMINER

## **COVER LETTER**:

тò:

SUBJECT:    PFS World LLC     Name of Limited Liability Company			
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:  Jay Parkes  Name of Person  PFS world LLC  Firm/Company  4631 NW 31st ave 3066  Address  Fort Lauderdale FI 333009  City/State and Zip Code  Jp@pfsworld.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Jay Parkes  at (888) 773740005			
Please return all correspondence concerning this matter to the following:    Jay Parkes			
Jay Parkes Name of Person  PFS world LLC Firm/Company  4631 NW 31st ave 3066 Address  Fort Lauderdale FI 333009 City/State and Zip Code  Jp@pfsworld.com E-mail address: (to be used for future annual repport notification)  For further information concerning this matter, please call:  Jay Parkes  at (888)  773740005			
PFS world LLC Firm/Company  4631 NW 31st ave 3066 Address  Fort Lauderdale FI 333009 City/State and Zip Code Jp@pfsworld.com E-mail address: (to be used for future annual repport notification)  For further information concerning this matter, please call:  Jay Parkes  at (888)  773740005			
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Firm/Company  4631 NW 31st ave 30f6  Address  Fort Lauderdale FI 333009  City/State and Zip Code  Jp@pfsworld.com  E-mail address: (to be used for future annual repport notification)  For further information concerning this matter, please call:  Jay Parkes  at (888) 773740005			
4631 NW 31st ave 3066  Address  Fort Lauderdale FI 333009  City/State and Zip Code  Jp@pfsworld.com  E-mail address: (to be used for future annual repport notification)  For further information concerning this matter, please call:  Jay Parkes  at (888) 77.37.40005			
Fort Lauderdale FI 333009  City/State and Zip Code  Jp@pfsworld.com  E-mail address: (to be used for future annual repport notification)  For further information concerning this matter, please call:  Jay Parkes  at (888)  77.37-40005			
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For further information concerning this matter, please call:  Jay Parkes  at (888) 773740005			
For further information concerning this matter, please call:  Jay Parkes  at (888) 773740005			
Jay Parkes at ( 888 ) 7/37/40005  Name of Person Area Code & Daytime/Telephon			
Name of Person Area Code & Daytime: relepno			
	e Number		
Enclosed is a check for the following amount:			
Certificate of Status Certified Copy (additional copy is eenclosed)	60.00 Filing 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//GOURIER ADDRES ADDRESS:  Registration Section  Division of Corporations  Division of Corporations  Clifton Building  2661 Executive Center Circle	RESS:		

Tallahasseee, FL 32301

## ARTICLES OF AMENDIMENIT TO ARTICLES OF ORGANIZATION OF

	PFS world LLC			
(Name of th	ne Limited Liability Company as it now : appea (A Florida Limited Liability Company)	rs on our records.)		
The Articles of Organization for this I	Limited Liability Company were filed con	11/27/2009	and assigned	
Florida document numberL0	9000008973			
This amendment is submitted to amer	nd the following:			
A. If amending name, enter the new	w name of the limited liability compainy he	ere:		
			7. 6	
The new name must be distinguishable a "L.L.C."	and end with the words "Limited Liability (Comp	pany," the designation "	LLC" or the abbreviation	
Enter new principal offices address	, if applicable:		55= 01 =	
(Principal office address MUST BE.	A STREET ADDRESS)		ms B O	
	······································	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
			11E 80	
Enter new mailing address, if applie	cable:			
(Mailing address MAY BE A POST	OFFICE BOX)			
B. If amending the registered agregistered agent and/or the new reg	gent and/or registered office addresss on c gistered office address here:	our records, <u>center</u>	the name of the new	
Name of New Registered Ag	gent:			
New Registered Office Addr			,	
	lE <sub>l</sub>	Enter Florida street address		
	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. Il 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, IF.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 Registerred Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enterritheititle, iname, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member <u>Title</u> <u>Name</u> <u>Address</u> Type of Action **MGRM** Celeste Long 4631 NW 31st cave ☐ Add Remove Ft Lauderdale FEI 33309 MGRM Gloria Parkes 445 Park ave 99thffloor **✓** Add Newvork NY 10002 Remove Add [ ☐ Remove ∏ Add Remove **™**dd Remove ☐Add ☐ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) February 2 2010 Dated \_\_\_\_\_ Signature of a member or authorized representative of a member Typed or printed name of significe

Page 2 of 2

Filing Fee: \$25.00