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2011 JUL 22 PM 12: 25
SECRETARY OF STATE

C. LEWIS
JUL 2 5 2011
EXAMINER

COVER LETTER

TO: Registration Division of C	Section Corporations	·		
SUBJECT: Loyalook, LLC				
		nited Liability Company		
The enclosed Articles	of Amendment and fee(s) are su	abmitted for filing.		
Please return all corres	pondence concerning this matte	er to the following:		
·		Tim D. Henkel, Esq.		
		Name of Person		
	Henkel & Cohen, P.A.			
	Firm/Company			
	18001 Old Cutler Road, Suite 600			
		Address		
	Miami, FL 33157			
	City/State and Zip Code			
	tdh@n E-mail address:	niamibusinesslitigators.com to be used for future annual report notif	ication)	
For further information	concerning this matter, please			
	Tim Henkel	at (305)	377-8802	
Name of Person		Area Code & Daytim	e 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 enclosed	Certificate of Status & Certified Copy (additional copy is enclosed)	
MAILING ADDRESS: Registration Section		STREET/COURI Registration Sectio		

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

1.

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2011 JUL 22 PM 12: 25

Loyalog	k. LLC	SECRETARY OF STATE TALLAHASSEE. FLORID	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appea		
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	June 30, 2009 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited ligh	ility company he	œ:	
TWIUSA	A, LLC		
The new name must be distinguishable and end with the words "Lim "L.L.C."	ited Liability Comp	any," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	1330 West A	venue, Suite 101	
(Principal office address MUST BE A STREET ADDRESS)	Miami Beach	, Florida 33139	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		, Florida	
•	City	Zip Code	

New Registered Agent's Signature, if changing Registered Agent;

ن

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



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 <u>Title</u> <u>Address</u> Type of Action Name □ Add Remove ☐ Add Remove ∏ Add ☐ Remove Add Remove DbA□ Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Jaap Hoekstra, Managing Member Typed or printed name of signee Page Z of 2

Filing Fee: \$25.00