

L  
LO9000103613

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

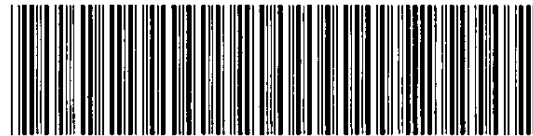
(Business Entity Name)

(Document Number)

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RECEIVED  
10 JAN 14 PM 1:47  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
10 JAN 14 PM 2:40  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

B. KOHR  
JAN 15 2010  
EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 14, 2010

SUSIE KNIGHT  
CSC  
TALLAHASSEE, FL

SUBJECT: EIJ ASSOCIATES, LLC  
Ref. Number: L09000103613

RECEIVED

10 JAN 15 PM 1:54

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA  
10 JAN 14 PM 2:40  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**RESUBMIT**

Please give original  
submission date as file date.

We have received your document for EIJ ASSOCIATES, LLC and the authorization to debit your account in the amount of \$25.00. However, the document has not been filed and is being returned for the following:

Item B seems to indicate that the Registered Agent is being changed to CORPORATION SERVICE COMPANY.

If that is so, please list the complete name and address of the company in Item B, and please sign the acknowledgement statement at the bottom of the page.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr  
Regulatory Specialist II

Letter Number: 210A00001170



CORPORATION SERVICE COMPANY

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 JAN 14 PM 2:40

ACCOUNT NO. : I20000000195

REFERENCE : 248656 7745323

AUTHORIZATION :

COST LIMIT : \$ 25.00

*[Signature]*

ORDER DATE : January 12, 2010

ORDER TIME : 1:14 PM

ORDER NO. : 248656-010

CUSTOMER NO: 7745323

**RESUBMIT**

Please give original  
submission date as file date.

DOMESTIC AMENDMENT FILING

NAME: EJJ ASSOCIATES, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT  
       RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER'S INITIALS: \_\_\_\_\_

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 JAN 14 PM 2:40

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

E I J ASSOCIATES, 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 10/27/2009 and assigned  
Florida document number LC09000103613

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 "L.L.C."

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 new registered agent and/or the new registered office address here:

Name of New Registered Agent:

CORPORATION SERVICE COMPANY

New Registered Office Address:

1201 HAYS STREET, TALLAHASSEE, FL 32301

(Enter Florida street address)

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 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)

Sue G. Knight  
as its agent

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>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGRM</u>	<u>VIG LLC</u>	<u>1606 Wilky St</u> <u>Hollywood FL 33020</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGRM</u>	<u>Shapiro, Reid</u>	<u>7111 Mandarin Drive</u> <u>Boca Raton, FL 33433</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>MGRM</u>	<u>Aboub, Bension</u>	<u>17541 Circle Palm Court</u> <u>Boca Raton, FL 33496</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>MGRM</u>	<u>BAMIRA, Joseph</u>	<u>15 Shadowlawn Dr.</u> <u>Oakhurst, NJ 07755</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>          </u>	<u>                                  </u>	<u>                                  </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u>          </u>	<u>                                  </u>	<u>                                  </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated

January 12, 2010

\_\_\_\_\_  
Signature of a member or authorized representative of a member

Michael Wallace  
\_\_\_\_\_  
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00