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(Re	questor's Name)	
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D. BRUCE

APR 27 2010

EXAMINER

COVER LETTER

TO:	Registration S Division of Co		,	•			
SUBJI	ECT:	Tablewar	e Bargains, LLC				
	-	Name of Limi	ted Liability Company				
		f Amendment and fee(s) are sub condence concerning this matter	•				
			Marlon Dunker				
Ta			Name of Person				
		Tal	oleware Bargains, LLC				
			Firm/Company				
			7721 Cheri Court				
			Address				
			Tampa, FL 33634		2 2	5	
City/State and Zip Code mdunker@tablewarebargains.com				A	~		
		mdunke	er@tablewarebargains.com	1	TAS A	APR 26	-
For fur	ther information	E-mail address: (t	o be used for future annual report notif	ication)	37 OF S	P	
		arlon Dunker	at (_813)	882-8700	F STATE FLORIDA	<u>အ</u>	•
	Name	of Person	Area Code & Daytim	e Telephone Number	Þ		
Enclos	ed is a check for t	the following amount:					
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	l) Certified	e of Status &		
MAILING ADDRESS: Registration Section		tration Section	STREET/COURI Registration Section				

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Tableware Bargains, LLC		
(Name of the Limite	d Liability Company as it now appea A Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited	Liability Company were filed on	02/18/10	and assigned
Florida document number L1000001			
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liability company her	re:	
The new name must be distinguishable and end w "L.L.C."	rith the words "Limited Liability Compa	any," the designation "	LLC" or the abbreviation
Enter new principal offices address, if appli	cable:		7ALS
(Principal office address MUST BE A STRE			
			ASS TAR
,		_	
Enter new mailing address, if applicable:			1 CO
(Mailing address MAY BE A POST OFFICE BOX)			ORIGINAL ST
	•		
B. If amending the registered agent and registered agent and/or the new registered of		our records, enter	the name of the new
Name of New Registered Agent:	Marlon Dunker		
New Registered Office Address:			
	En	ter Florida street add	dress
		, 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

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>	Address	Type of Action
MGR_	Monica McCullough	7721 Cheri Court Tampa, FL 33634	Add ✓ Remove
		•	Add Remove
			Add Remove
D. If amendi	ing any other information, enter cl	hange(s) here: (Attach additional sheets, if necessary	·)
			F1L
	April 23,	2010 . BA	PH 3: 57
	W		
•	Signature of a me	ember or authorized representative of a member	
-	Т	Marlon Dunker yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00