

Division of Corporations

Page 1 of 1

L1 0000027695

Florida Department of State
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.

(((H10000066044 3)))



H100000660443ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

FILED
10 MAR 24 AM 8:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : LEGALZOOM.COM INC.
Account Number : I20010000062
Phone : (323) 962-8600
Fax Number : (323) 962-3889

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
TWP T'S DISTRIBUTORS LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

RECEIVED

10 MAR 24 AM 6:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu

J. BRYAN

Help
MAR 25 2009

EXAMINER

FAX COVER SHEET

TO	
COMPANY	
FAX NUMBER	18506176383
FROM	Tony Burroughs
DATE	2010-03-23 16:29:37 PDT
RE	FL SOS - LZ order # 7766096

10 MAR 24 AM 8:58
 FILED
 SECRETARY OF STATE
 ALACHUA COUNTY, FLORIDA

COVER MESSAGE

Tony Burroughs | Special Filings Specialist Business Special Filing 323.962.8600 x862 |
 Fax 323.337.0742 |
 tburroughs@legalzoom.com<mailto:tburroughs@legalzoom.com>www.legalzoom.com<
 http://www.legalzoom.com/> | 7083 Hollywood Blvd., Suite 180, Los Angeles, CA 90028
 <http://www.legalzoom.com/>

This transmission may contain confidential and privileged material for the sole use of the
 intended recipient(s). Any review, use,
 distribution or disclosure by others is strictly prohibited. If you are not the intended
 recipient (or authorized to receive for the
 recipient), please contact the sender by reply email and delete all copies of this
 message. LegalZoom is not an attorney and can
 only provide self help services at your specific direction. LegalZoom.com, Inc. is a
 registered and bonded legal document
 assistant, #0104, Los Angeles County (exp. 12/09). Prices, features, terms and
 conditions are subject to change without notice.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TWP T'S DISTRIBUTORS LLC
(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:

Tony Burroughs
(Name of Person)

Legalzoom.com, Inc.
(Firm/Company)

7083 Hollywood Blvd., Suite 180
(Address)

Los Angeles, CA 90028
(City/State and Zip Code)

FILED
10 MAR 24 AM 8:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Tony Burroughs at (323) 962-8600
(Name of Person) (Area Code & Daytime 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)
- \$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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

TWP T'S DISTRIBUTORS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
10 MAR 24 AM 8:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 03/12/2010 and assigned
Florida document number L10000027695

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Two T's Distributors LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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: _____

New Registered Office Address: _____

(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)

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>
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated 3/23, 2010

Thomas Delapine Sr.
Signature of a member or authorized representative of a member

Thomas Delapine Sr, managing member
Typed or printed name of signee

FILED
 10 MAR 24 AM 8:58
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA