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2010 OCT 12 AM II: 21

J. SAULSBERRY EXAMINER OCT 13 2010

VENDOR SOLUTIONS, Inc.

510-West 6th Street Suite #308 | Los Angeles CA 90014

Florida Secretary of State Registration Section PO Box 6327 Tallahassee, FI 32314

ATTN: Corporation Bureau Staff

SECRETARY OF STATE TALLAHASSEE, FI ORIOL

RE: A Script In Time, LLC

Attached is a filing for an amendment. Please return a copy of the Amendments upon approval.

A check in the amount of \$25.00 for the filing is enclosed.

Should you have any questions, please do not hesitate to contact us at the below information.

Thank You,

Vendor Solutions Inc. 510 West 6th Street Suite #308 Los Angeles, CA 90014 213-623-0722 phone 213-673-1395 fax

COVER LETTER

Division of Co			
A Sc	ript In Time, LL	C	
SUBJEÇT:		ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Vendor Solut	tions Inc.	
	 	Name of Person	
Vendor Solutions Inc.			
Firm/Company			
	510 W. 6th St	t. #308	
		Address	
	Los Angeles	, CA 90014	20 TAC
	support@ind	City/State and Zip Code corporatefast.com	2010 OCT 12 SECRETARY L
	E-mail address: (to be used for future annual report notification	CT 12 AM HASSEE, FL
For further information	concerning this matter, please of	call:	PG € M
Yooch Cho	ng	213-623-0	722 Right 2
Name	of Person	Area Code & Daytime Tel	ephone Number 1.5
Enclosed is a check for t	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		STREET/COURIER Registration Section Division of Corporation	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cards by Jori Jae, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) and assigned Florida document number L10000082836 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: A Script In Time, LLC 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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member Title Name <u>Address</u> **Type of Action** ☐ Add Remove ☐ Add Remove ☐ Add ______Remove ___ Add _____ Remove \Box Add __Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member of authorized representative of a member Jori J. Harkey Typed or printed name of signee

'If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

Page 2 of 2

Filing Fee: \$25.00