L100000 87019

(Re	questor's Name)			
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PICK-UP	TIAW	MAIL .		
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J. BRYAN

AUG 24 2010

EXAMINER

COVER LETTER

TO: Registration Division of C	s Section Corporations			
SUBJECT:	YSN P	romotions LLC		
	Name of Lim	ited Liability Company		
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corre	spondence concerning this matte	er to the following:		
		Fatbardha Whitwam		
		Name of Person		
		YSN Promotions		•
	Firm/Company		·	450
	4	4162 N Jodhpur Court		FILEU 3: 23
		Address		
		Oviedo, Fl 32765		TU Z
		City/State and Zip Code		95.73
	Pat E-mail address:	ulwhitwam1@gmail.com (to be used for future annual report n	otification)	P
For further information	on concerning this matter, please	call:		
Fat	bardha Whitwam	at (_407_)	535-6563	
Nam	e of Person		time Telephone Number	
Enclosed is a check for	or the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	sed) Certified	e of Status &
MA	ILING ADDRESS:	STREET/COU	RIER ADDRESS:	

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

	YSN Promotions LLC Liability Company as it now appear Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Lia Florida document number L10000087	ability Company were filed on	08/19/2010	and assigned
This amendment is submitted to amend the follo A. If amending name, enter the new name of	_	<u>e</u> :	
The new name must be distinguishable and end with "L.L.C."	n the words "Limited Liability Compa	ny," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applica	able:		
(Principal office address MUST BE A STREET	TADDRESS)	Z Z	SE
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	r registered office address on o	our records, <u>enter t</u>	he name of the new
registered agent and/or the new registered off Name of New Registered Agent:	Fatbardha Whitwam		
New Registered Office Address:	4162 N Jodhpur Court		
New Registered Office Address,	•	ter Florida street add	ress
	Oviedo	, Florida	32765
	City	,	Zip Code
I hereby accept the appointment as registered the provisions of all statutes relative to the praccept the obligations of my position as registered being filed to merely reflect a change in the recompany has been notified in writing of this could be accept the obligations of the company has been defined in writing of this could be accept the foliance of the policy and do accept the policy and d	l agent and agree to act in this caroner and complete performance tered agent as provided for in Cheegistered office address, I hereby	of my duties, and I a napter 608, F.S. Or, confirm that the lin	m familiar with and if this document is nited liability

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

	Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	Fatbardha Whitwam	4162 N Jodhpur Court Oviedo, Fl 327	Add Remove
<u>MGRM</u>	Paul C Whitwam	4162 N Jodhpur Court Oviedo, Fl 327	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ding any other information, enter ch	nange(s) here: (Attach additional sheets, if necessary)	FILED 3: 23 NIG 23 PM 3: 23
_			9. 3: 23 PA 3: 23
 Dated	August 20th , _	2010 .	
	Fatharcha Whiko Signature of a mei	mber or authorized representative of a member	*
	Fatbardha Whitwam	Paul C Whitw	am

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00