## L10000095702

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(
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J. SAULSBERRY EXAMINER

DEC 2 0 2010

## **COVER LETTER**

TO: Registration : Division of Co	Section orporations	
SUBJECT:	Temporary Creations LLC Name of Limited Liability Company	
The enclosed Articles	of Amendment and fee(s) are submitted for filing.	
Please return all corres	pondence concerning this matter to the following:	
	Chen Kodary Name of Person	
	Social Agency Firm/Company	
	3501 Keyser are #6	
	Hollywood / FL / 33021  City/State and Zip Code  Info @ Social Agency 1.com	
	E-mail address: (to be used for future annual report notification)	2 KM 20 1
For further information	n concerning this matter, please call:	å 3 ~ .~
	Area Code & Daytime Telephone Number  954 - 394 - 804 9	
Enclosed is a check for	the following amount:	
\$25.00 Filing Fee	\$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	)

MAILING ADDRESS:
Registration Section

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

(Name of the Limited Liability Company (A Florida Limited Liability	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>L10000095702</u>	vere filed on September 13,2010 and assigned
This amendment is submitted to amend the following:	See P
A. If amending name, enter the new name of the limited liabil	ity company here:
Social Agency LLC  The new name must be distinguishable and end with the words "Limite"	<u> </u>
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	3501 Keyser ave #6 Holly wood, FL, 33021
(Principal office address MUST BE A STREET ADDRESS)	Holly wood, FL, 33021
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 here:	
Name of New Registered Agent:	hen Kodury  Neyser are #6  Enter Florida street address
New Registered Office Address:	Enter Florida street address
	wood Florida 330 Z   Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree the provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as publing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	ete performance of my duties, and I am familiar with and rovided for in Chapter 608, F.S. Or, if this document is

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member					
<u>Title</u>	Name	Address	Type of Action		
			Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
<del></del>			Add Remove		
D. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary)	: B		
Dated	12/13/10		_		
		r or authorized representative of a member	· · · · · · · · · · · · · · · · · · ·		
	Chyn Typed	hodar Jor printed name of signee			

Page 2 of 2

Filing Fee: \$25.00