10000124016

	Requestor's Name)		
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(,	Address)	•	
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(1)	City/State/Zip/Phone #)		
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SECHETARY OF STATE
ALLAHASSEF, FLORIDA

B. BOSTICK
FEB 11 2011

COVER LETTER

Division of Cor	porations				
SUBJECT:	ECOM IN	TERACTIVE, LLC			
	Name of Limited Liability Company				
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
		Jesse Tomalty			
	1	Name of Person		_	
		Firm/Company		_	
-		2200 SW 10th ST.			
, -		Address	<u> </u>		
	DEERFIE	ELD BEACH, FLORIDA	A 33442		
		City/State and Zip Code		-	
	JESSE	TOMALTY@YAHOO. to be used for future annual repo	СОМ	11 SE ALL	
	E-mail address: (to be used for future annual repo	ort notification)	- AH	STOR- Mary
For further information c	oncerning this matter, please of	eall:		FEB 10 1	7
JES:	SE TOMALTY	at (_561_)	843-1442	P P	
Name of	f Person	Area Code &	Daytime Telephone Num	PH 2:	Ó
				28 ATE RIDA	
Enclosed is a check for th	ne following amount:			15 —	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	Certifi oclosed) Certifi	Filing Fee, icate of Status & ied Copy ional copy is enc	
MAILI	ING ADDRESS:	STREET/C	OURIER ADDRESS:	:	

Registration Section Division of Corporations P.O. Box 6327

TO:

Registration Section

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

ECOM INTER	RACTIVE, LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appear Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Compan	y were filed on	12/01/2010	and assigned
Florida document numberL10000124016			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company her	<u>e</u> :	
The new name must be distinguishable and end with the words "Lin"L.L.C."	nited Liability Compa	ny," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:	-2200-SW-10t	St.	
(Principal office address MUST BE A STREET ADDRESS)	Deerfield Bea	ch, Florida 33442	
Enter new mailing address, if applicable:	2200 SW 10th	n St.	
(Mailing address MAY BE A POST OFFICE BOX)	Deerfield Bea	ch, Florida 33442	1
		AHAS	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he	office address on o <u>re</u> :	ur records, enter th	ne name of the new
Name of New Registered Agent:		STATE LORIDA	5: 2:
New Registered Office Address:		_	
	Ent	er Florida street addr	ress
		, 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
			Add Remove
			Add Remove
<u>, </u>			
· ·			Damaria
			□ Remove
D. If am	nending any other information, enter cha	nge(s) here: (Attach additional sheets, if nec	Pessary.) 11 FEB T
			ASSEE F
			D 2128
Dated	February 9, 20	011 Dr. S	
	Signature of a mem	ber or authorized representative of a member	
		Gilboa Merdinger	
	Typ	ped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00