

(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
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(Document Number)	
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ANNE VANCOT STATE

K SALY EXAMINER OCT 14 2011

COVER LETTER

TO: Registration Division of C						
SUBJECT:	Sizzlir	ng Dealz LLC				
	Name of Lim	ited Liability Company				
The enclosed Articles of Amendment and fee(s) are submitted for filing.						
Please return all corres	spondence concerning this matter	r to the following:				
		Seanna Klein				
		Name of Person				
		Sizzling Dealz LLC				
		Firm/Company				
	4;	730 SE Compass Way				
		Address				
		Stuart, FL 34997				
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·			
	F	s4klein@yahoo.com to be used for future annual report notifical	·			
T		•	ion)			
For further information	n concerning this matter, please of	call:				
:	Seanna Klein	at (772) 21	14-8383			
Name	e of Person	Area Code & Daytime T	elephone Number			
Enclosed is a check for	r the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
MAI	II INC ADDRESS.	STDFFT/COUDIFE	A A A A A A A A A A A A A A A A A A A			

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

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	sizzling Dealz, LLC	our records.
(<u>Name of the Limited Lia</u> (A Flo	ability Company as it now appears on orida Limited Liability Company)	our records.
The Articles of Organization for this Limited Liabi Florida document numberL1100010114		ember 2nd,2011 and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
	Got Hot Deals, LLC	
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	(DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent: New Registered Office Address:	e address here:	records, enter the name of the new
-	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

	<u>Name</u>	Address	Type of Acti
			Add Remove
			Add Remove
			Add Remove
f ameno	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	-
			
			_
 d	October 10th 20		-

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Filing Fee: \$25.00