

L11000115118

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

**A. LUNT**  
OCT 17 2011  
**EXAMINER**

Office Use Only



800213155618

10/14/11--01021--010 \*\*25.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 OCT 14 PM 3:06

FILED

LAW OFFICES OF  
**BRYN & ASSOCIATES**  
ATTORNEYS AND COUNSELORS AT LAW

ONE BISCAYNE TOWER, SUITE 2680  
TWO SOUTH BISCAYNE BOULEVARD  
MIAMI, FLORIDA 33131

TELEPHONE (305) 374-0501  
FACSIMILE (305) 372-8068  
E-MAIL: general@markbryn.com

October 13, 2011

**VIA FEDERAL EXPRESS**

Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

FILED  
2011 OCT 14 PM 3:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Re: Articles of Amendment the Articles of Organization for Tiny Threads, LLC  
Document No.: L11000115118**

Dear Sir or Madam:

Enclosed is an original Articles of Amendment to the Articles of Organization for Tiny Threads, LLC, together with this firm's check in the amount of twenty five (\$25.00) to cover the applicable filing fee.

Please do not hesitate to contact the undersigned should you have any questions regarding this request. Thank you for your assistance.

Very truly yours,



Bibi Ruiz  
Legal Assistant

encl.

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Tiny Threads, LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark Bryn

Name of Person

Bryn & Associates, P.A.

Firm/Company

2 South Biscayne Blvd, Suite 2680

Address

Miami, Florida 33131

City/State and Zip Code

bibi@markbryn.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Bryn

Name of Person

at ( 305 )

374-0501

Area Code & Daytime Telephone Number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 OCT 14 PM 3:00

FILED

Enclosed is a check for 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  
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**

Tiny Threads, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on October 7, 2011 and assigned  
Florida document number L11000115118.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

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)

FILED  
2011 OCT 14 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida street address

\_\_\_\_\_, 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>	<u>Address</u>	<u>Type of Action</u>
Mgr	Cynthia Dalagelis	2 South Biscayne Blvd Miami, Florida 33131	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated \_\_\_\_\_

FILED  
2011 OCT 14 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\_\_\_\_\_  
Signature of a member or authorized representative of a member  
Mark Bryn, authorized representative  
\_\_\_\_\_  
Typed or printed name of signee