

420000057701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

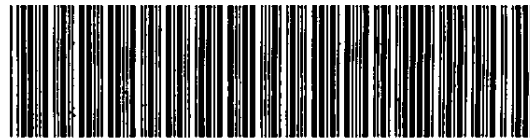
(Business Entity Name)

(Document Number)

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

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200247638052

05/08/13--01023--015 \*\*30.00

FILED  
13 MAY -8 11 5:19  
MAY 09 2013

MAY 09 2013  
D. BUTLER

May 2, 2013

Re: Name Change on Articles of Organization

To Whom It May Concern:

Please see the attached application stating that my name has changed due to marriage. I need to change my business bank account to my current legal name. I can be contacted at (561) 379-6284 during the day and my return address is 1105 Greenpine Blvd A1 West Palm Beach FL 33409.

Please contact me with any questions regarding this matter.

Sincerely,

Jamie M. Williamson (formerly Jamie M Patterson)

FILED  
13 MAY -8 11 19 19

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Shop N Ship International 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:

Jamie Williamson  
Name of Person

\_\_\_\_\_  
Firm/Company

1105 Greenpine Blvd A1  
Address

West Palm Beach FL 33409  
City/State and Zip Code

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

For further information concerning this matter, please call:

Jamie Williamson at (561) 379-6284  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

FILED  
13 MAY -8 11:53:19

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Shoo N Ship International 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 4/30/2012 and assigned  
Florida document number L12000057701.

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**)

13791 NW 19 AVE  
Unit 3  
OPALOCKA FL 33054

Enter new mailing address, if applicable:  
(Mailing address **MAY BE A POST OFFICE BOX**)

1105 GREENPINE BLVD. A1  
WEST PALM BEACH FL  
33409

**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>
_____	_____	_____	<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.)

Jamie Patterson has married and has  
a new last name. Jamie Patterson  
should be changed to Jamie Williamson.  
(See marriage license attached)

Dated April 25, 2013.

Carlton Williamson

Signature of a member or authorized representative of a member

Carlton Williamson

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED  
13 MAY -8 12:35:19

4190

Department of Health ♦ Vital Statistics

STATE OF FLORIDA

MARRIAGE RECORD

TYPE IN UPPER CASE

USE BLACK INK

This license not valid unless seal of Clerk,  
Circuit or County Court, appears thereon

13 MAY -8

(STATE FILE NUMBER)

CFN 20120497493

OR BK 25653 PG 0884

RECORDED 12/13/2012 15:22:33

Palm Beach County, Florida

Sharon R. Bock, CLERK &amp; COMPTROLLER

Pg 0884; (1pg)

2012MLN001420

(APPLICATION NUMBER)

## APPLICATION TO MARRY

1 GROOM'S NAME (First, Middle, Last) CARLTON WILLIAMSON			2 DATE OF BIRTH (Month, Day, Year)	
3a. RESIDENCE - CITY, TOWN, OR LOCATION WEST PALM BEACH	3b. COUNTY PALM BEACH	3c. STATE FL	4. BIRTHPLACE (State or Foreign Country) FLORIDA	
5a. BRIDE'S NAME (First, Middle, Last) JAMIE MICHELLE PATTERSON		5b. MAIDEN SURNAME (if different) MICHAELS		6. DATE OF BIRTH (Month, Day, Year)
7a. RESIDENCE - CITY, TOWN, OR LOCATION WEST PALM BEACH	7b. COUNTY PALM BEACH	7c. STATE FL	8. BIRTHPLACE (State or Foreign Country) MASSACHUSETTS	

WE THE APPLICANTS NAMED IN THIS CERTIFICATE EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY.

SIGNATURE OF GROOM (Sign full name using black ink)

TITLE OF OFFICIAL  
Deputy Clerk

SIGNATURE OF BRIDE (Sign full name using black ink)

TITLE OF OFFICIAL  
Deputy Clerk10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE)  
NOV-07-2012

12. SIGNATURE OF OFFICIAL (Use black ink)

14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE)  
NOV-07-2012

16. SIGNATURE OF OFFICIAL (Use black ink)

## LICENSE TO MARRY

AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.

COUNTY ISSUING LICENSE  
Palm Beach County18. DATE LICENSE ISSUED  
NOV-07-201218a. DATE LICENSE EFFECTIVE  
NOV-10-201219. EXPIRATION DATE  
JAN-09-2013

SIGNATURE OF COURT CLERK OR JUDGE

20b. TITLE  
Clerk of Court

20c. BY D.C.

## CERTIFICATE OF MARRIAGE

I HEREBY CERTIFY THAT THE ABOVE NAMED GROOM AND BRIDE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.

21. DATE OF MARRIAGE (Month, Day, Year)

22. CITY, TOWN, OR LOCATION OF MARRIAGE

23a. SIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink)

23c. ADDRESS (Of person performing ceremony)

23b. NAME OF PERSON PERFORMING CEREMONY  
(Or notary state)

24. SIGNATURE OF WITNESS TO CEREMONY (Use black ink)

25. SIGNATURE OF WITNESS TO CEREMONY (Use black ink)



CARLA MANUEL  
MY COMMISSION # 00048801  
EXPIRES December 14, 2016

THIS LICENSE IS NOT VALID UNLESS SEAL OF CLERK, CIRCUIT OR COUNTY COURT, APPEARS THEREON

Book25653/Page884

Page 1 of 1

I hereby certify that the foregoing is a true copy  
of the record in my office this day, Jan 04, 2013.

Sharon R. Bock, Clerk Circuit Court, Palm Beach County, Florida

BY Deborah Bock Deputy Clerk