

L12000067103

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(City/State/Zip/Phone #)

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05/25/12--01015--010 **30.00

12 MAY 25 PM 3:19

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GIFT BASKET DEPOT 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:

DAVIDOFF, YOCHED V

Name of Person

GIFT BASKET DEPOT LLC

Firm/Company

5450 SOUTH STATE ROAD 7 STE 40

Address

HOLLYWOOD FL 33314

City/State and Zip Code

info@aviatorexpress.com

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

12 MAY 25 PM 3:19

For further information concerning this matter, please call:

YOCHED V DAVIDOFF,

Name of Person

at (754)

245-2324

Area Code & Daytime Telephone Number

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**

GIFT BASKET DEPOT LLC

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

19 MAY 25 PM 1:19
RECEIVED
CLERK OF CIRCUIT COURT
JANICE L. HARRIS

The Articles of Organization for this Limited Liability Company were filed on 05/18/2012 and assigned
Florida document number L12000067103.

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)

DAVIDOFF, YOCHAVED V

5450 SOUTH STATE ROAD 7

HOLLYWOOD FL 33314

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PINHAS, SHARONA

5450 SOUTH STATE ROAD 7

HOLLYWOOD FL 33314

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

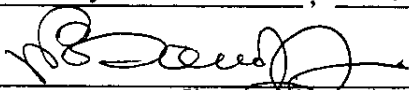
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	DAVIDOFF, YOCHEVED V	5450 SOUTH STATE ROAD 7 STE 40 HOLLYWOOD FL 33314	☐ Add ☒ Remove
MGR	DAVIDOFF, YOCHEVED V	5450 SOUTH STATE ROAD 7 STE 40 HOLLYWOOD FL 33314	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

all Members will remain on the LLC document . The only change will be

DAVIDOFF, YOCHEVED V as MGR

Dated May 22, 2012



Signature of a member or authorized representative of a member

YOCHEVED V DAVIDOFF

Typed or printed name of signee