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SECRETARY OF STATE TALLAHASSEE. FLORIDA

OCT 2 5 2013

	•	COVER LETTER	
TO: Registration Sect Division of Corpo		1	.v.
SUBJECT: SLAA		TOO EMPORIUM, LLC ed Liability Company	
The enclosed Articles of Ar	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	lence concerning this matter	to the following:	
	Rynu	Name of Person	·
		Firm/Company	
	101 11th	ST. OCEAN #34	2
	MARATHON	FL 33050 City/State and Zip Code	
	KRIMINAL D E-mail address: (to	FART Q VAHOO, COH o be used for future innual report notificati	on)
For further information con	cerning this matter, please ca	all:	
Rynn La Name of F	VIENE erson	at (239) 209-769 Area Code & Daytime Te	
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

ISLAND TIME (Name of the Limited Limit	TATTOO EMPORIUM LLC iability Company as it now appears on our records.) lorida Limited Liability Company)	
The Articles of Organization for this Limited Liab	• • •	and assigned
Florida document number <u>L130000 lol</u> This amendment is submitted to amend the follow	ving:	FIL Z013 OCT 24 SECRETAR TALLAHASS
A. If amending name, enter the new name of the		
The new name must be distinguishable and end with t "L.L.C."	the words "Limited Liability Company," the designation	1 "HAA" or the abbreviation
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET.	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>0x)</u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>ente</u> ce address here:	r the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street d	address
	, Florida	

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.

City

Zip Code

MGR = Manager MGRM = Managing Member					
Title	<u>Name</u>	Address	Type of Action		
MGRH	RYAN LAVIGNE	126 SIOUX ST.	Add		
		126 SIDUX ST. TAYERNIER, FL 330	270 KRemove		
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Page 3 of 3

Filing Fee: \$25.00

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