## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

From:

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Account Number : I20010000062 : (323)962-8600 Phone : (323)962-3889 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WORLD TEASHOP OF KEY WEST, LLC

| WORLD TERROTOR OF     | 1121 (1201)== |
|-----------------------|---------------|
| Certificate of Status | 0             |
| Certified Copy        | 1             |
| Page Count            | 06            |
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10/3/2014

## **COVER LETTER**

|                  | ration Sectl<br>on of Corpo |   |  |                  |                                     |   |
|------------------|-----------------------------|---|--|------------------|-------------------------------------|---|
| SHP/ECE: N       | Vorld Tea S                 | Shop of Key West, LLC                           |  |                  |                                     |   |
| SUBJECT: _       |                             | Name of Limi                                    | ited Liability Company   |                  |                                     |   |
| The enclosed A   | rticles of An               | nendment and fee(s) are sub                     | mitted for filing.   |                  |                                     |   |
| Please return al | l correspond                | ence concerning this matter                     | to the following:  |                  |                                     |   |
|                  |                             | Cheyenne Moseley                                |  |                  |                                     |   |
|                  |                             |   | Name of Person   | <del></del>      |                                     |   |
|                  |                             | Legalzoom.com, Inc.                             |  |                  |                                     |   |
|                  |                             |   | Firm/Company   |                  |                                     |   |
|                  |                             | 100 W. Broadway Suit                            | te 100   |                  |                                     |   |
|                  |                             |   | Address  |                  |                                     |   |
|                  |                             | Glendale, CA 91210                              |  |                  |                                     |   |
|                  |                             | Junglegreg@yahoo.co                             | City/State and Zip Code  |                  | 281 ARA<br>138032N<br>130 <b>HR</b> |   |
|                  |                             | E-mail address: (                               | to be used for future annual report notific                              | ation)           | 器 名                                 |   |
| For further info | rmation con                 | cerning this matter, please ca                  | all:   |                  | 12音 1                               |   |
| Imelda Vaso      | quez                        |   | 323 962-8600 ex  | d 7950           | $m_{co}$                            | m |
|                  | Name of P                   | crson   |  | Telephone Number | A II: 13                            | Ö |
| Enclosed is a ci | heck for the                | following amount:                               |  |                  | -                                   |   |
| □ \$25.00 Fili   | ng Fee                      | □ \$30,00 Filing Fee &<br>Certificate of Status | S55.00 Filing Fee &     Certified Capy     (additional copy is enclosed) | Certified        | te of Status &                      |   |

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

| World Tea Shop of Key West, LLC   |  |   |
|---|--|---|
| ( <u>Name of the Limited Llability Compa</u><br>(A Florida Limited I  | any as it now appears on our records<br>Liability Company) | <u>s.</u> )   |
| The Articles of Organization for this Limited Liability Company Florida document number L13000116554                  | were filed on 8/19/2013                                    | and assigned  |
| This amendment is submitted to amend the following:   |  |   |
| A. If amending name, enter the new name of the limited liab   | oility company here:                                       |   |
| BigBirds R Us, LLC  |  |   |
| The new name must be distinguishable and end with the words "Limited Liab   | pility Company," the designation "LLC                      | "Or the abbreviation "L.L.C."   |
| Enter new principal offices address, if applicable:   | 30859 Granada Ave  |   |
| (Principal office address MUST BE A STREET ADDRESS)   | Big Pine Key, FL 33043                                     |   |
|   |  | <u> </u>  |
| Enter new mailing address, if applicable:   | 30859 Granada Ave  | LOSU TO CARA  |
| (Mailing address MAY BE A POST OFFICE BOX)  | Big Pine Key, FL 33043                                     | 17/20 W   |
|   |  |   |
| B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her | ffice address on our records<br>e:                         | enter the name of |
| Name of New Registered Agent:   |  |   |
| New Registered Office Address:  | Enter Florida street addres.                               | \$  |
|   | Flo  | orida   |
|   | City   | Zıp 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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

| MGR = Ma $AMBR = Au$ | nager<br>thorized Member |         |                |
|----------------------|--------------------------|---------|----------------|
| <u>Title</u>         | Name                     | Address | Type of Action |
|                      |                          |         | □ Add          |
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| GREGORY SCORZA, 3  | 0859 Granada Ave, Big pine key, Florida 33043  |
|--|--|
| RENATA SCORZA, 308   | 359 Granada Ave, Big pine key, Florida 33043   |
|  |  |
|  |  |
|  |  |
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| ctive date, if other than the office the date must be specific, cannulate this document is filed by the Florian transfer of th | date of filing: (optional) not be prior to date of receipt or filed date and cannot be more than 90 days after or filed Department of State) |
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