U300015034B

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03/05/18--01034--009 **25.00



J. HARRIS

COVER LETTER

	ion Section of Corporations		ž.				
	BABY TIME LLC						
SUBJECT:	Name of Lim	ited Liability Company					
			·				
The enclosed Artic	eles of Amendment and fee(s) are sub	mitted for filing.					
Please return all co	prrespondence concerning this matter	to the following:					
	ROBBIE HICKS		• *				
	, , , , , , , , , , , , , , , , , , ,	Name of Person					
	US BABY TIME LLC						
		Firm/Company					
	8411 W OAKLAND PARK BLVD SUITE 201						
		Address					
	SUNRISE, FLORIDA 333	351					
		City/State and Zip Code					
	mgint@esameriea8411.con E-mail address: (n to be used for future annual report notifi	cation)				
For further inform	ation concerning this matter, please c	all:	•				
Robbie Hicks		754 423-4751					
	Name of Person	Area Code Daytime	Telephone Number				
Enclosed is a chec	k for the following amount:						
■ \$25.00 Filing	Fee S30.00 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

US BABY	TIME LLC		
(Name of the Limited Liability Com (A Florida Limite	pany as it now app d Liability Company	ears on our records.) y)	
The Articles of Organization for this Limited Liability Compar	ny were filed on j	October 24, 2013	and assigned
Porida document number L13000150343			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	ibility company	here:	
LiLi and Tom USA I	LLC		
The new name must be distinguishable and contain the words "Limited Lia	bility Company," th	e designation "LLC" or	the abbreviation "L.L.C"
Enter new principal offices address, if applicable:		*	
(Principal office address MUST BE A STREET ADDRESS)	<u></u>		
Enter new mailing address, if applicable:			-S
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		on our records, <u>e</u>	nter the name of the
Name of New Registered Agent:			
New Registered Office Address:	•		
	Enter	Florida street address	
•		, Florid	la
	Сиу	,	la Zip Coste

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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person-being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	NATALIYA KIRK	7311 NW 17 Court	☐ Add
		HOLLYWOOD, FL 33024	
ر.			
MGRM	DAN ORAN	8411 W Oakland Park Blvd	□ Add
		SUNRISE, FL 33351	□ Remove
			C Change
			□ Add
			☐ Remove
			☐ Change
		<u> </u>	□ Add
	•	· · · · ·	Remove Change
			Change Change
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	-		Remove
			☐ Change
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			☐ Change

					
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. All C. A. Challestina					
(V)					
					
fective date, if other than the	duta of filing: 02/27	/2018	,	(optional)	
in effective date is listed, the date must <u>ote:</u> If the date inserted in this blood ocument's effective date on the Do	t be specific and cannot b ock does not meet the	e prior to date of filing a applicable statutory f	or more than 90 day	s after filing.) Pursuan	n to 605,020 be listed a
		•			
e record specifies a delayed The 90th day after the reco		ut not an effectiv	e time, at 12	01 a.m. on the	earlier (
EUDDIIADA 22	2010				<u>~</u>
ated		·			

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Typed or printed name of signee

Filing Fee: \$25.00