



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
07/22/2002	200220300550	AMEND/ARTICLES- ORGANIZATION/DOM. LLC (LAM)	50.00	.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

OHIO PROFILE INC
CHUCK LEPPERT
5960 WINTERBERRY DR
GALLOWAY, OH 43119

STATE OF OHIO

Ohio Secretary of State, J. Kenneth Blackwell

878639

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

TJ INVESTMENTS, LTD.

and, that said business records show the filing and recording of:

Document(s)
AMEND/ARTICLES-ORGANIZATION/DOM. LLC

Document No(s):
200220300550



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of
the Secretary of State at Columbus,
Ohio this 19th day of July, A.D.
2002.

J. Kenneth Blackwell
Ohio Secretary of State

JUL 18 '02 11:25 AM KADISH HINKEL WEIBEL 216 696 3492 TO 916148533102-51 P.03/04

Prescribed by **J. Kenneth Blackwell**Ohio Secretary of State
Central Ohio: (614) 466-3910

Toll Free: 1-877-SOS-FILE (1-877-767-3453)

www.state.oh.us/sos

e-mail: busserv@sos.state.oh.us

Expedite this Form: (Select One)

Mark additional fees following:

- ☐ Yes PO Box 1390
Columbus, OH 43216
*** Requires an additional fee of \$100 ***
- ☒ No PO Box 1028
Columbus, OH 43216

**Limited Liability Company Certificate of
Amendment / Restatement / Correction**

(Domestic or Foreign)

Filing Fee \$50.00

(CHECK ONLY ONE (1) BOX)

(1) Domestic Limited Liability Company ☒ Amendment (129-LAM) ☐ Restatement (142-LRA) August 18, 1994 (Date of Organization)	(2) Foreign Limited Liability Company ☐ Correction (135-LFC) _____ (Home State)
	_____ (Qualifying in Ohio on MM/DD/YY)

The undersigned authorized representative of

TJ Investments, Ltd.

878639

(Name)

(Registration Number)

The above stated Limited Liability Company does hereby certify that the undersigned is duly authorized to execute this certificate, and hereby certifies that the above named Limited Liability Company

☒ Amend ☐ Restate ☐ Correct

the following:

Complete the information in this section if box (1) Restatement is checked, all sections below must be completed.
 If box (1) Amendment or box (2) Correction is checked only complete sections that applies.

FIRST: The name of said limited liability company shall be:

(the name must include the words "limited liability company", "limited", "Ltd.", "LLC", or "L.L.C.")

SECOND: (OPTIONAL) This limited liability company shall exist for a period of Perpetual**THIRD:** The address to which interested persons may direct requests for copies of any operating agreement and any bylaws of this limited liability company is (OPTIONAL):

(street address)

NOTE: P.O. Box Addresses are NOT acceptable.

(city, township, or village)

(state)

(zip code)

☐ Please check if additional provisions attached hereto are incorporated herein and made a part of these articles of organization.**FOURTH: Purpose (OPTIONAL)**
 RECEIVED
 SECRETARY OF STATE
 2002 JUL 19 PM 12:39

JUL 16 '02 11:25 FR KADISH HINKEL WEIBEL 216 696 3492 TO 916148533102-51 P.04/04

Complete the information in this section if box (2) is checked and the Limited Liability Company wants to appoint a statutory agent

The limited liability company hereby appoints the following as its agent upon whom process against the limited liability company may be served in the state of Ohio. The name and complete address of the agent is:

(Name)

(Street)

NOTE: P.O. Box Addresses are NOT acceptable.

Ohio

(City, village or township)

(State)

(Zip Code)

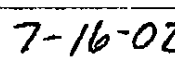
The limited liability company irrevocably consents to service of process on the agent listed above as long as the authority of the agent continues, and to service of process upon the OHIO SECRETARY OF STATE if:

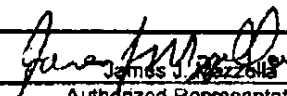
- A. the agent cannot be found or,
- B. the limited liability company fails to designate another agent when required to do so, or,
- C. the limited liability company's registration to do business in Ohio expires or is cancelled.

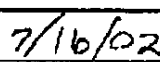
REQUIRED

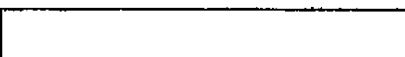
Must be authenticated (signed)
by an authorized representative
(See Instructions)

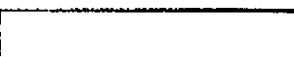

Anthony J. Mazzella
Authorized Representative


7-16-02
Date


James J. Mazzella
Authorized Representative


7/16/02
Date


Authorized Representative


Date