

107000104495

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

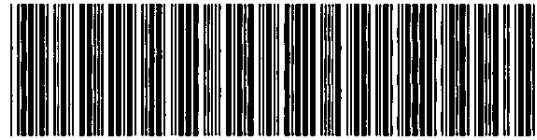
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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T. CLINE

JAN 10 2008

EXAMINER

107-104495



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 2, 2008

GUY SPEROUTO
8982 TAFT STREET
PEMBROKE PINES, FL 33024

SUBJECT: TRIO PIZZA COMPANY, LLC
Ref. Number: L07000104495

We have received your document for TRIO PIZZA COMPANY, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Regulatory Specialist II

Letter Number: 608A00000062

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TALLAHASSEE, FLORIDA

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COVER LETTER

**TO: Registration Section
Division of Corporations**

**SUBJECT: TRIO PIZZA COMPANY 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:

Guy D Sperduto CPA
(Name of Person)

Guy D Sperduto CPA
(Firm/Company)

8982 TART STREET
(Address)

Pembroke Pines FL 33024
(City/State and Zip Code)

For further information concerning this matter, please call:

Guy D Sperduto at (954) 432-0272
(Name of Person) (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

2008 JAN -9 AM 10:29
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

TRIO PIZZA COMPANY, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 10/15/2007 and assigned Florida document number 187.000104495

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here :

Pizza Aiolis LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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)

2008 JAN -
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
AM 10:29

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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)

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Trio Pizza Company 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:

Guy D Sperouto CPA
(Name of Person)

Guy D Sperouto CPA
(Firm/Company)

8982 TART STREET
(Address)

Pembroke Pines FL 33024
(City/State and Zip Code)

For further information concerning this matter, please call:

Guy D Sperouto at (954) 432-0272
(Name of Person) (Area Code & Daytime Telephone Number)

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

TRIO PIZZA COMPANY, LLC

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(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10/15/2007 and assigned Florida document number 187.000104495

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here :

Pizza Aioli's LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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)

FILED
2007 JAN - 8 AM 10: 29
SECRETARY OF STATE
TALLAHASSEE, 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.

(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:

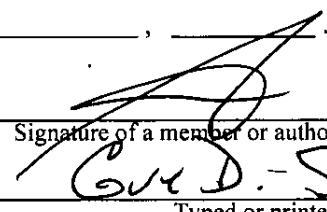
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated _____

Signature of a member or authorized representative of a member


Typed or printed name of signee