11000009148

Office Use Only



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11 APR - | AM #: 24

T. HAMPTON

APR -4 2011

EXAMINER

COVER LETTER

	stration Sec sion of Corp					
SUBJECT:		H&DR	oadhouse LLC			
-		Name of Limit	ed Liability Company			
The enclosed	Articles of A	Amendment and fee(s) are sub-	mitted for filing.			
Please return	all correspor	ndence concerning this matter	to the following:			
			Harold P. Vigliano			
			Name of Person			
H & D Roadhouse LLC						
			1610 Venus Street			
		Address				
		Merr	itt Island, Florida 32953	·		
			City/State and Zip Code			
		E-mail address: (t	o be used for future annual report notif	ication)		
For further in	formation co	oncerning this matter, please ca	all:			
Harold P. Vigliano			at (_321_)	403-6432		
	Name of	f Person	Area Code & Daytim	e Telephone Number		
Enclosed is a	check for th	ne following amount:				
\$25.00 Fi	ling 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

SECRETARY OF STATE DIVISION OF CORPORATIONS

11 APR -1 AM H 24

H & D Roadhouse	LLC		
(<u>Name of the Limited Liability Company as it no</u> (A Florida Limited Liability Co	w appears on our ompany)	records.)	
The Articles of Organization for this Limited Liability Company were file	d on01/2	1/2011	and assigned
Florida document numberL11000009148			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability com	pany here:		
The new name must be distinguishable and end with the words "Limited Liabil "L.L.C."	ity Company," the c	lesignation "LLC	" or the abbreviation
Enter-new-principal offices address, if applicable:			44.4 4 4
(Principal office address MUST BE A STREET ADDRESS)		· · · · · · · · · · · · · · · · · · ·	<u></u>
			
Enter new mailing address, if applicable:		****	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office add registered agent and/or the new registered office address here:	ress on our reco	rds, 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 Flori	da street addres	
	Enter Florida street address		
City	·	, Florida	Zip 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 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 Title Name <u>Address</u> Type of Action MGRM Deborah Van Orman 1610 Venus Street . ✓ Add Merritt Island, Florida 32953 Remove Remove Add Add ☐ Remove \square Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member

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Harold P. Vigliano
Typed or printed name of signee

Filing Fee: \$25.00