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T. HAMPTONI

MAY 4 0 2011

EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: Water way Cafe and Ice Cream Parlor 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:
Jerri L. Anicito Name of Person
Waterway Cafe and Ice Cream Parlor LLC
116 Avenue A UNIT A
FORT Pierce Fla 34950 City/State and Zip Code
Danicito @ Bell South, Net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Terri L. Anicito at (112) 429-1550 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) 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

TENT SECRETARY OF STATE ATTOMINISION OF CORPORATIONS

AK		
	OF 1	1 MAY -9 PM 1:44
(Name of the Limit	(A Florida Limited Liability Company)	Ge and IceCream par
The Articles of Organization for this Limited	Liability Company were filed on	1 2/1/1 and assigned
Florida document number SEA LLOS	•	
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company here:	
Water way Cafe and The new name must be distinguishable and end of L.L.C."	ce Cream Parlor Livith the words "Limited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if app	icable:	
TO THE REPORT OF A CONTROL	TOTAL ADDRESS	
Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFIC	E BOX) d/or registered office address on our rec	ords, enter the name of the new
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFIC B. If amending the registered agent an	E BOX) d/or registered office address on our rec	ords, enter the name of the new
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFIC B. If amending the registered agent an	E BOX) d/or registered office address on our rec	ords, <u>enter the name of the ne</u> w
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFIC B. If amending the registered agent andegistered agent andegistered agent andegistered	d/or registered office address on our recoffice address here: Jerri L Anicito 116 Avenue A Uni	+ A
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFIC B. If amending the registered agent and registered agent and registered agent and registered agent and registered agent. Name of New Registered Agent:	d/or registered office address on our recoffice address here: Jerri L Anicito 116 Avenue A Uni	+ A
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFIC B. If amending the registered agent and agent agent and agent agent.	d/or registered office address on our recoffice address here: Jerri L Anicito 116 Avenue A Uni	+ A
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFIC B. If amending the registered agent and agent agent and agent agent.	d/or registered office address on our recoffice address here: Jerri L Anicito 116 Avenue A Uni	+ A

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this docume 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

Page 1 of 2

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
lgen+	Salvatore Anicito	Ft Piera F1 34950	Add
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add SECRET
D. If amei	nding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.,	FIL FTAR'N F C
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	usiness Altogether. I		
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7=	J	Agent Officer.	<u> </u>
*2			
Dated 5	dalu.		
	Juni L. aniate Signature of a member	alvatore O True	
	Jerdi L. Anicito / Tyned	SAlvatore D. Anicito	

Page 2 of 2

Filing Fee: \$25.00