L12000115388

(Requestor's Name)	-
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	-
(Document Number)	-
Certified Copies Certificates of Status	-
Special Instructions to Filing Officer:	1
^/	

Office Use Only

B. KOHR
SEP 2 0 2012
EXAMINER



700239768827

09/19/12-- 01004--014 **25.00

DIVISION OF CARROCKATIONS

**SEP 19 PM 3: 30

COVER LETTER

Division of Corporations	
SUBJECT: C'APPETITO III PIZZA É DECI, 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:	
Richard Murphy Name of Person	National Section
Firm/Company Fil/2/ C.U.A.D.E./0(10.E. (U.A.))	SEP 19 PA
5426 GUADETOUPE WAY	ن <u>م</u>
NAPLES F1. 34119	30 · 5
City/State and Zip Code RICHIE 127 @ ME. COM E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
RICHARD MUNDAY at (239 287-224) Name of Person Area Code & Daytime Telephone Number	_
Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} Certified Copy (additional copy is enclosed	Status &

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

The Articles of Organization for this Limited Liability Company were filed on _ Florida document number _ C / 2000 / 1/5 3 88 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: CAPPETITO III PIZZA & DECI CLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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:

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.

City

Enter Florida street address

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

		Add Remove Add Remove Add Remove Add Remove Add Remove Add Remove
		Remove Add Remove Add Remove Add Add
	,	Remove Add Remove
		Remove Add
		<u> </u>
		Add Remove
r information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	_
		
		_
	Signature of a member	Signature of a member or authorized representative of a member **Proceedings of the content of

Page 2 of 2

Filing Fee: \$25.00