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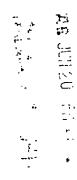
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QUID IE7	Big Brunos	s Bites, LLC			ماند ماند	
SOBJEK	<u> </u>	Name of Lim	nited Liability Company			
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please re	eturn all correspo	ondence concerning this matter	to the following:			
		Adam Losey, Esq.				
			Name of Person		_	
		Losey PLLC				
		-	Firm/Company		_	
	1420 Edgewater Drive					
			Address		_	
		Orlando, FL 32804				
		Firm@Losey.law	_			
		E-mail address: (to be used for future annual rep	ort notification)		
For furth	er information e	concerning this matter, please c	all:			
Adam L	osey		407 906-1			
	Name o	of Person	Area Code	Daytime Telephone Numbe	er	
Enclosed	f is a check for th	he following amount:				
\$25.00 Filing Fee		□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	Certifie d) Certifie	0.00 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

Big Brunos Bites, 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 L Florida document number $\frac{L14000159981}{L14000159981}$	iability Company	were filed on 10/14/14	and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liab	oility company here:	
The new name must be distinguishable and contain the v	ords "Limited Liabi	ility Company," the designar	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1420 Edgewater Drive Orlando, FL 32804	,
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:			records, enter the name of the new
New Registered Office Address:	1420 Edgewate		****
	Orlando	Enter Florida stre	Florida 32804

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 605, 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

Page 1 of 3

If amending or removed	(Authorized Person(s) authorized t from our records:	o manage, enter the title, name, and addres	ss of each person being add
MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Vanessa Zacchini	1304 Formosa Avenue. Winter Park, Florida 32789	
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			□ Change
			Add
			Remove
			□ Change
			Add
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an effective d	ate is listed, the do	ite must be speci	fic and cannot l	be prior to date of	Tiling or more than	(optional) 90 days after filing.)	Pursuant to 605,0207
<u>ote:</u> If the c	late inserted in t ffective date on	his block does	not meet the	applicable stati	utory filing requi	rements, this date v	will not be listed as
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e record s	pecifies a de	layed effect	ive date, b	ut not an ef	fective time,	at 12:01 a.m. o	on the earlier o
The 90th	day after the	e record is f	îled.				
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Filing Fee: \$25.00

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