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EXAMINER



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SECRETARY OF STATE

COVER LETTER

TO:	Registration S Division of Co			
SUBJI	ECT:	Steel C	city Pizza, LLC	
301301			ited Liability Company	
The en	closed Articles of	f Amendment and fee(s) are sul	omitted for filing.	
Please	return all corresp	ondence concerning this matter	to the following:	
	Michael A Ganier			
			Name of Person	2010 SEI TALI
			Firm/Company	2010 JAN 14 PM 2: 35 SECRETARY OF STATE TALLAHASSEE, FLORIO
			1356 Bridge Hill Lane	PA
			Address	2: 35 STATE FLORID
Clerr		Clermont, FL 34711	7F 35	
			City/State and Zip Code	
		E-mail address: (to be used for future annual report notification	n)
For fur	ther information	concerning this matter, please of	call:	
	Mi	ichael Ganier	at () 352-5	51-4888
	Name	of Person	Area Code & Daytime Tel	ephone Number
Enclos	sed is a check for	the following amount:		
\$25	5.00 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		tration Section ion of Corporations 30x 6327	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Stee	l City Pizza, LLC		
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appear Limited Liability Company)	rs on our records.)	
· ·	, , , , , , , , , , , , , , , , , , , ,		
The Articles of Organization for this Limited Liability	Company were filed on	01/05/2010	and assigned
Florida document number L1000000845	 -		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company he	<u>re</u> :	
The new name must be distinguishable and end with the we	ords "Limited Liability Comp	any," the designation "L	LC" or the abbreviation
"L.L.C."		į r	SEC 010
Enter new principal offices address, if applicable:		<u> </u>	in s
(Principal office address MUST BE A STREET ADD	(RESS)	ć	SAR E
Enter new mailing address, if applicable:		, v.v. , v.v. , en	
(Mailing address MAY BE A POST OFFICE BOX)		7	
	.		· · ·
B. If amending the registered agent and/or regi		our records, enter t	he name of the new
registered agent and/or the new registered office ad	<u>dress here</u> :		
Name of New Registered Agent:			
New Registered Office Address:			
	E	nter Florida street add	ress
	·····	, Florida	
	City		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 Type of Action . **Title** Name **Address** Denise Y Ganier MGRM 1356 Bridge Hill Lane ☑ Add ☐ Remove Clermont, FL 34711 ☐ Add Remove ☐ Add Remove Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) January 11 2010 Dated __ of a member or authorized representative of a member Michael A Ganier

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00