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JUN 0 1 2017 J SHIVERS

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Premiere Catering, 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:
Julie Fodor Name of Person
Premiere Catering, LCC
1816 9+11 S+ W
Bradenton FL 34205 City/State and Zip Code Aroseinabook@amail.com
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:
Sulie Fodor at (941) 713-4691  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status 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

<u> </u>	re Ce	atering, LL	<u></u>
(Name of the Limited	Liability Compan Florida Limited Li	y as it now appears of our records.) lability Company)	
			1
The Articles of Organization for this Limited Liab	bility Company v	were filed on <u>05 / / / 6</u>	and assigned
Florida document number <u>LOI DOCOC</u>	7487		<b>1</b>
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liabil	lity company here:	
<u> </u>			
The new name must be distinguishable and contain the wor	ds "Limited Liabilit	ty Company," the designation "LLC" or	the abbreviation L.L.C.
Enter new principal offices address, if applicat	ole:	1816 9th St1	west <sup>®</sup>
(Principal office address MUST BE A STREET		Bradenton F	L 34205
		111111111111111111111111111111111111111	
Enter new mailing address, if applicable:		1816 9th 31	+ West
(Mailing address MAY BE A POST OFFICE BO	0X)	Bradenton	FL 34205
		— Di voca	
B. If amending the registered agent and/or			nter the name of the ne
registered agent and/or the new registered office	<u>ce address here</u>	:	
		Ma Foolace	
Name of New Registered Agent:		CITE FOOD!	
New Registered Office Address:	19	316 9th St	$\omega$
	$\bigcirc$	Enter Florida street address	21/1000
		MACN HOM, Florid	a 34205
		Cuy	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 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Aut	thorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Kibby, Wayne A	1418 37th St Ct w Bradenton FL 342	O Add
		Bradenton FL 342	Remove
			Change
MGR	Rantz, Mark	3003 Bayshore Ga	dens PKW
		Bradenton FL 3420	Remove
	<b></b> .		☐ Change
MGR	Sulie Foodor	1702 -12th Ave W	Add
		Bradenton FC	
		34205	Change
MGR	David Meador	9989 Watchula Rd	Add
		Myakka City	C Remove
	_	34251	Change
	Kibby Linda S	14/8 37th Street Court West	□ Add
	Brade	Bradenton FL 34205	Remove
			Change
	<u></u>		□ Add
			🗖 Remove
			Change

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(If an effective	late, if other ( e date is listed, th	e date must be	specific and	cannot be p	rior to date of	filing or more	than 90 days	ptiona after filin	g.) Pursi	ant to 6	05.0207 (3
	e date inserted s effective date					itory filing r	equirements,	this dat	e will n	ot be li	isted as th
	specifies a th day after			ate, but	not an ef	ective tin	ie, at 12:0	1 a.m	. on tr	ie ear	ner or:
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Typed or printed name of signee

Filing Fee: \$25.00