

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2003 8:00 am
Secretary of State

02-28-2003 90038 050 ****60.00

DOCUMENT # L02000021463

1. Entity Name

GOATS HEAD SOUP, LLC



Principal Place of Business

626 SOUTH 8TH GUM STREET
AMELIA ISLAND FL 32034

Mailing Address

626 SOUTH 8TH GUM STREET
AMELIA ISLAND FL 32034

2. Principal Place of Business

626 SOUTH 8TH + GUM STS.

3. Mailing Address

626 SOUTH 8TH + GUM STS.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☒

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIROCKMAN, WILLIAM M JR.
262 SOUTH 8TH STREET
AMELIA ISLAND FL 32034

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *William M. Sirockman Jr.*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/27/03
DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM SIROCKMAN, WILLIAM M JR. 626 SOUTH 8TH STREET AMELIA ISLAND FL 32034	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *William M. Sirockman Jr.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (10/02)

Attachment

L02000021463

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

30089301

GOATS HEAD SOUP

(Present Name)
(A Florida Limited Liability Company)

FIRST: The date of filing of the articles of organization was 8-1-02

SECOND: The following amendment(s) to the articles of organization was/were adopted by the limited liability company:

NAME CHANGE TO: PORTOFINO, LLC

INSTEAD OF: GOATS HEAD SOUP, LLC

Dated 2/27/03

x William M. Sirockman Jr.

Signature of a member or authorized representative of a member

WILLIAM M. SIROCKMAN JR.

Typed or printed name of signee

Filing Fee: \$25.00