

L020000022348

Florida Department of State
Division of Corporations
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Division of Corporations

Fax Number : (850) 617-6393

From:

Account Name : NASON, YEAGER, GERSON, WHITE & LIOCE P.A.

Account Number : 073222003555

Phone : (561) 696-3307

Fax Number : (561) 290-1590

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: bmann@nasonyeager.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MEYER METZ RESTAURANTS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

JAN 04 2021

A. LURY

2022 JAN -3 AM 9:00

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2022 JAN -3 AM 10:17

**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

FIRST: The name of the limited liability company is: MEYER METZ RESTAURANTS, LLC

SECOND: The Florida Document number of the limited liability company is: L02000022348

THIRD: Document to be corrected is: Articles of Organization

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

The incorrect statement is "The Company shall exist until December 31, 2016". The statement is incorrect because

F.S.605.0108(3) states that "A limited liability company has an indefinite duration."

The correct statement is "The Company shall exist perpetually, unless sooner dissolved according to law".

OR

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

OR

- ☐ The electronic transmission of the record was defective.

John Metz

December 30, 2021

Signature of Authorized Representative

Date

John Metz

Signature of new registered agent, if applicable: (NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

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.

Registered Agent's Signature

Filing Fee: **\$25.00**
Certified Copy: **\$30.00 (optional)**

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