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Camily Style Deli CCT (Requestor's Name) 2490 M. Brandon Bluel. (Address) (Address) (Address)	50
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL (Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	





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ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST	<u>`</u> :	The name of the limited liability company is:		
Fami	ly Styl	e Deli LLC		
<u>SECO</u>	<u>ND</u> :	The articles of organization or the application to transact business		
(CH	ECK T	HE APPROPRIATE BOX AND COMPLETE THE APPLICABLE ST	ATEMEN	Ţ
V	incorre	ins an incorrect statement. The incorrect statement, the reason the statect, and the corrected statement are as follows: e V needs to have George Barker removed because he is not a		
	Managing Member in the LLC.			
	In his	s place will be Paul Racke with Title MGRM at the same addres	s	
				
	<u>OR</u>			
		efectively signed. The manner in which the document was defectively propriate correction is as follows:	y signed a	nd /
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Dated:	Tue	sday, July 29th2003		
		3-l) Sh		
		Signature of a member or authorized representative of a member		
		Paul J. Racke		
		Typed or printed name of signee		
		Filing Fee: \$25,00 Certified Copy: \$30.00 (optional)		

Electronic Articles of Organization For Florida Limited Liability Company

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Article I

The name of the Limited Liability Company is: FAMILY STYLE DELI LLC

Article II

The street address of the principal office of the Limited Liability Company is: 2490 W. BRANDON BLVD BRANDON, FL. 33511

The mailing address of the Limited Liability Company is:

9806 DETROP ST. RIVERVIEW, FL. 33569

Article III

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

PAUL J RACKE 9806 DETROP ST. RIVERVIEW, FL. 33569

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: PAUL J. RACKE

Article V

The name and address of managing members/managers are:

Title: MGRM SUE L RACKE 9806 DETROP ST. RIVERVIEW, FL. 33569

Title: MGRM CEORGE BARKER: Change To Paul J. Racke 9806 DETROP ST. RIVERVIEW, FL. 33569

Signature of member or an authorized representative of a member Signature: PAUL J. RACKE

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