(Re	equestor's Name)	<del></del>
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PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	_ Certificates of Status	·
Special Instructions to	Filing Officer:	
٦	Office Use Only	



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## **COVER LETTER**

TO: Registration Se Division of Cor						
FINLEY'	SLLC					
SUBJECT:	Name of Lim	ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	NATHAN MCKENZI	E				
	The second secon	Name of Person				
	NATHAN MCKENZI	E, CPA				
		Firm/Company				
	13384 SW 288 ST			ma i	23	
	****	Address			YON HBZ	
	HOMESTEAD, FL 3	3033			OÝ -	-
	mckenziecna@aol or	City/State and Zip Code			<b>→</b>	
	mckenziecpa@aol.co	to be used for future annual report notif	fication)	1 S	AM IO:	
For further information c	oncerning this matter, please c	all:			: 53	7644.47
NATHAN MCKENZ	ZIE	786 231-6694		7	•	
Name o	f Person	at () Area Code Daytime	e Telephone Number	<del></del>		
						•
Enclosed is a check for the	<i>j</i> -	_				
\$25.00 Filing Fee	Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filin  Certificate  Certified C  (additional c	of Status Copy		
Registr Divisio P.O. Bo	ING ADDRESS: ation Section on of Corporations ox 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	n ations nter Circle			

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FINLEY'S LLC	
( <u>Name of the Limited Liability Compa</u> (A Florida Limited l	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L0500005664  This amendment is submitted to amend the following:	were filed on 01/19/2005 and assigned
•	
A. If amending name, enter the new name of the limited liab	auty company nere:
FINLEY'S BAHAMIAN RESTAURANT LLC	and a second sec
The new name must be distinguishable and end with the words "Limited Liab	offity Company," the designation "LLC" or the abbreviation "L.L.C,"
Enter new principal offices address, if applicable:	2710 W ATLANTIC BOULEVARD
(Principal office address MUST BE A STREET ADDRESS)	POMPANO BEACH, FL 33069
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	2710 W ATLANTIC BOULEVARD POMPANO BEACH, FL 33069
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address , Florida
	City Zp Coder
New Registered Agent's Signature, if changing Registered Agent	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete	

If Changing Registered Agent, Signature of New Registered Agent

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 amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

<u>'itle</u>	<u>Name</u>	Address	Type of Action
			Add
			Add
			Remove
			□ Add
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			Remarkation 17
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Page 3 of 3

Filing Fee: \$25.00

