LOS 000029739

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
(City/State/Zip/Prione #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
;.			

Office Use Only



700137834707

11/14/08--01009--016 **25.00

2000 NOV 21 P 12: 15

T. HAMPTON
NOV 24 2008
EXAMINER

. COVER LETTER

TO: Registration S Division of Co		•		
SUBJECT: Irish R				
•	(Name of Lim	ited Liability Company)		
	f Amendment and fee(s) are sub	-		
Please return an corresp	ondence concerning this matter	to the following.		
	Brian Palmer			
(Name of Person)				
	Brian Palmer Accounting & Tax, Inc.			
		(Firm/Company)		
	2937 Bee Ridge Rd., Suite 2 (Address)			
		(Address)		
	Sarasota, FL 34239 (City/State and Zip Code)			
		(City/State and Zip Code)		
For further information	concerning this matter, please c	all:		
Brian Palmer at (941) 922-4744				
(Name of Person)		(Area Code & Daytime Telephone Number)		
Enclosed is a check for	the following amount:			
☑ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & 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		STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building		

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301



RECEIVED

08 NOV 2 / PM 1: 53

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

November 18, 2008

BRIAN PALMER BRIAN PALMER ACCOUNTING & TAX INC 2937 BEE RIDGE RD - STE 2 SARASOTA, FL 34239

SUBJECT: IRISH ROVER PUB, LLC

Ref. Number: L05000029739

We have received your document for IRISH ROVER PUB, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please list the full name of the person you want to have removed from this LLC.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II Registration/Qualification Section

Letter Number: 908A00057613

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Irish Rover Pub, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 3/24/05 and assigned Florida document number L05000029739 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: (Enter Florida street address)

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 608, 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.

(City)

(If Changing Registered Agent, Signature of New Registered Agent)

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

MGR = Manager

MGRM = Managing Member Title 1 <u>Name</u> <u>Address</u> **Type of Action** James M Veseu **MGRM** ☐ Add Remove 6518 Gateway Ave Sarasota, FL 34231 ☐ Add Remove 🗂 Add Remove ☐ Add Remove ___ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Changing Paul Duffy from a MGR to a MGRM $\overline{\Box}$ 2008 Dated November 11 Signature of a member or authorized representative of a member PAUL DUFFY Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00