## Lole 000001151

(Re	equestor's Name)	
(Ad	ldress)	
. (Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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2008 MAR 25 AM II: 06
SECRETARY OF STATE

T. CLINE
MAR 2 6 2008
EXAMINER

06



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 28, 2008

SHARON'S SIDING LLC. 408 WISCONSIN AVENUE LYNN HAVEN, FL 32444

SUBJECT: SHARON'S SIDING, LLC

Ref. Number: L06000001751

We have received your document for SHARON'S SIDING, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 408A0001246

District of Comparations DO BOY 6297 Tellahogges Florida 2921

## **COVER LETTER**

TO: Registration Division of Co			
SUBJECT: Sharon	's Siding LLC		
SUBJECT: CHARGE	(Name of Lin	nited Liability Company)	
The enclosed Articles of	of Amendment and fee(s) are sul	omitted for filing.	
Please return all corres	pondence concerning this matter	r to the following:	
	Sharon Churchwell		
		(Name of Person)	
	Sharon's Siding LLC	c, dba Lunch Box Deli	
		(Firm/Company)	
	408 Wisconsin Aver		<del></del>
		(Address)	
	Lynn Haven, FL 32	444	
		(City/State and Zip Code)	
For further information	concerning this matter, please	call:	
Sharon Churchw	ell	at (850 ) 866-0312	
	e of Person)	(Area Code & Daytime Telephone No	imber)
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert	Filing Fee, ificate of Status & ified Copy itional copy is enclosed)
Regi Divis P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 thassee, FL 32314	STREET/COURIER ADDRES Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	2008 HAR 25 AM II: SECRETARY OF STATALLAHASSEE, FLOR

## · ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sharon's Siding LLC,		
( <u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on orida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liabi		
riorida document number LUOUUUU 1751	·············	
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Company," t	ne designation "LLC" or the abbreviation
B. If amending the registered agent and/or a registered agent and/or the new registered office		ecords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter F	lorida street address)
	YNot J.	
-	(City)	, Florida(Zip Code)
		, <u> </u>
New Registered Agent's Signature, if changing Regi	stered Agent:	
Town Tropies of Spent B Signature, if Changing 100g	50104 12 <u>6</u> 0211	
I hereby accept the appointment as registered a the provisions of all statutes relative to the prop accept the obligations of my position as register being filed to merely reflect a change in the regi company has been notified in writing of this cha	er and complete performance of my red agent as provided for in Chapter istered office address, I hereby conf	duties, and I Am Amiliar with and r 608, F.S. Or, I has decument is firm that the limited liabelity
	(If Changing Registered Agent, Si	unsture of New Resistance Agent)
	(11 Outubing profession referred 51)	

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Ma MGRM = 1	anager · · · · · · · · · · · · · · · · · · ·		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
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<del></del>			Add Remove
			Add Remove
			Add Remove
<del></del>	· ·		Add Remove
	ding any other information, enter char haron's Siding LLC, will engage i	nge(s) here: (Attach additional sheets, if neceson the operation of a delicatessen	ssary.)
<u>lo</u>	cated at 611 West 11th Street Pa	nama City, FL 32401	
<u>P</u>	roposed opening date, June 1, 20	008.	
_			200 7ALL
Dated Mar	ch 25 , 200		FIL 2008 HAR 25 SECRETARY ALLAHASSE
	Sharon	Unwienwal	Targetting (Freedman)
	Sharon Churchwell	per or authorized representative of a member	
	Турс	ed or printed name of signee	8 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

Page 2 of 2

Filing Fee: \$25.00