## L06000005106

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	<b>OTHER FILINGS</b>		REGISTRATION/QUA	ALIFICATION
170 <u>- 22</u> - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	<ul> <li>Annual Report</li> <li>Fictitious Name</li> </ul>	e	<ul> <li>Foreign</li> <li>Limited Partnership</li> <li>Reinstatement</li> <li>Trademark</li> <li>Other</li> </ul>	-
	CR2E031(7/97)			Examiner's Initials

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CR2E031(7/97)

## AMENDMENT TO ARTICLES OF ORGANIZATION OF ORLANDO PIE LLC

Pursuant to the Florida Statutes, the undersigned limited liability company adopts the following Amendment to its Articles of Organization, which Articles of Organization were approved by and filed with the Secretary of State of Florida on January 17, 2006, document number L06000005106.

1. The following Amendment to the Articles of Incorporation was adopted by the Members of the Company on January 19, 2006, and have consented to and authorized this Amendment by Action of the Members on January 19, 2006.

A. Article II of the Articles of Organization is hereby amended to read as follows:

## ARTICLE II - Address

The address of this Company shall be amended as follows: The mail address and street address of the principal office of the Limited Liability Comis 606 E. Livingston Street, Orlando, Florida 32803.

B. Article IV of the Articles of Organization shall be amended to thange the address of the Manager, Don Clemence, to read as follows: 606 E. Livingston Street, Flander, Florida 32803.

2. The remainder of the Articles of Incorporation shall remain the same and, except as herein amended, and shall remain in full force and effect.

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of the company as the duly authorized act of the said company this 23<sup>rd</sup> day of January, 2006.

ORLANDO PLE Robert L. Harding, Esquire

Authorized Representative of the Members

STATE OF FLORIDA COUNTY OF ORANGE

The foregoing instrument was acknowledged before me this 23<sup>rd</sup> day of January, 2006, by Robert L. Harding, authorized representative of the Members of Orlando Pie LLC, who is personally known to me (or who has produced \_\_\_\_\_\_\_ as identification) and who did/did not take an oath.

(SEAL)

Notary Public - State of Flohda My Commission Expires:

