

Ld0000013213

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

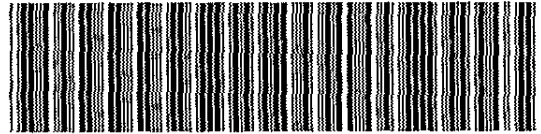
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

7/125

Amend.

Office Use Only



200077883162

07/24/06--01034--001 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 JUL 24 PM 3:35

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ISLAND FLAVA, LLC.
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CHRISTIANE JOSEPH
(Name of Person)

ISLAND FLAVA, LLC
(Firm/Company)

5239 Stone Oaks Dr.
(Address)

LAKE LAND, FL 33811
(City/State and Zip Code)

For further information concerning this matter, please call:

CHRISTIANE JOSEPH at 813 334-6754
(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
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Island FLAVA, LLC

(Present Name)
(A Florida Limited Liability Company)

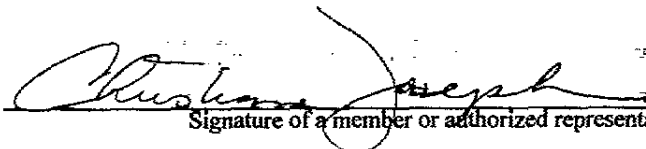
FIRST: The Articles of Organization were filed on 2-7-2006 and assigned
document number LO6000013213.

SECOND: This amendment is submitted to amend the following:

Please remove ~~Partner~~ ^{MAN} MARIE M. JASTRAM
Residing at 706 Patersons Street Lakeland, FL 33808
From the LLC ~~Partnership~~ and replace her
With Sandra Joseph residing at
5239 Stone Oaks Dr. Lakeland FL 33811
As a Managing ~~Partner~~ ^{member}.

Dated

July 13, 2006



Signature of a member or authorized representative of a member

Partner of Island FLAVA, LLC (MANAGER)

Typed or printed name of signee

Filing Fee: \$25.00

06 JUL 24 PM 3:35

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS