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(Requestor's Name)			
(Address)			
Man.			
(Address)			
,			
(City/State/Zip/Phone #)			
• •			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(5-5-1-5-2) (1-1-1-5)			
(Document Number)			
•			
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2010 DEC 30 PH 98: 51

C. LEWIS

JAN 1 2011

EXAMINER

COVER LETTER

TO: Registration Sect. Division of Corpo	ion · ** * * * * * * * * * * * * * * * * *	r dr. An	•					
AND PROCES	Dean Stre	et Sports Bar LL(C.	*:				
SUBJECT:		ited Liability Company						
The enclosed Articles of Ar	mendment and fee(s) are sul	bmitted for filing.						
Please return all correspond	lence concerning this matter	r to the following:						
		Brian R. Dodson						
		Name of Person						
	Hideaway Sports Bar							
		Firm/Company						
		1300 Lee Street						
	•	Address						
Fort Myers Florida 33901								
	City/State and Zip Code							
	mvmelody@msn.com E-mail address: (to be used for future annual report notification)							
For further information con				•				
Brian	R. Dodson	at (239)	850-	1696				
Name of P	erson	at (239) Area Code	& Daytime Telep	hone 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		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is en				

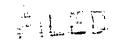
MAILING ADDRESS:

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



20/0 DEC 30 PH 28: 54

De	ean Street S	ports Bar LLC) SHOUT	Alti frigiliti
(Name of the Limite	d Liability Compa A Florida Limited I	ny as it now appea Liability Company)	rs on our records) (18	(33CE) (12 (20 (100)
The Articles of Organization for this Limited L			and assigned	
Florida document numberL0600006	3513			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, <u>enter the new name c</u>	of the limited liab	oility company her	<u>'e</u> :	
The new name must be distinguishable and end w	ith the words "Lim	ited Liability Compa	any," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applic	cable:	1300 0	LEE STREET	>
(Principal office address MUST BE A STREI	ET ADDRESS)	FORT M	42RS 9, 33901	
Enter new mailing address, if applicable:	1300 Lee Str	eet		
(Mailing address MAY BE A POST OFFICE	Fort Myers			
	Florida 3390	Florida 33901		
B. If amending the registered agent and registered agent and/or the new registered o			our records, <u>enter t</u>	he name of the new
Name of New Registered Agent:	Brian R. Do	dson		·
New Registered Office Address:	1300 Lee Street Enter Florida street address			
· ·				
	F	ort Myers	, Florida	33901
		City		Zip Code

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.

If Changing Registered Agent, Signature of New Registered Agent

If amending 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	<u>Name</u>	Address	Type of Action
MGRM	Arthur L. Baker	14049 Saint Kitts Drive Fort Myers Florida 33905	Add
MGRM	Virginia L. Kline	13376 Journeys End Fort Myers Florida 33905	
			Add Remove
			AddRemove
			Add Remove
	,	——————————————————————————————————————	Add Remove
D. If amend	ding any other information, enter	change(s) here: (Attach additional sheets, if necessa	nry.)
****			ZOÍO DEC 30
			C30 PH SS
Dated	ECEMBER 28.	BrAs)	0.000 2.000
	Signature of a re	nember or authorized representative of a member	····

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Filing Fee: \$25.00