

W6000092442

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

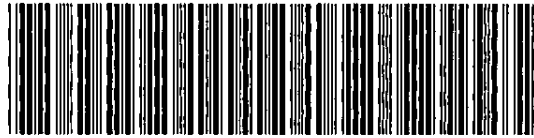
(Business Entity Name)

(Document Number)

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2008 OCT 24 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

T. CLINE

OCT 27 2008

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 17, 2008

JUERGEN HARTWICH
1110 SW 28TH STREET
CAPE CORAL, FL 33914

SUBJECT: CARSTEN & JACQUELINE UWIRA, LLC
Ref. Number: L06000092442

We have received your document for CARSTEN & JACQUELINE UWIRA, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return 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) 245-6020.

Tammi Cline
Regulatory Specialist II

Letter Number: 708A00054146

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**Department of State
Division of Corporations
P.O.Box 6327**

Tallahassee, FL 32314

SUBJECT: CARSTEN & JACQUELINE UWIRA, LLC L06000092442

Dear Sirs,

Attached you find the articles of amendment and a check for the amendments and a certified copy over

\$ 43.75

**FROM: Juergen Hartwich.
1110 SW 28th Street
Cape Coral, FL 33914**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Carsten + Jacqueline Uwira, 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:

Dr. Juergen Hartwich
(Name of Person)

(Firm/Company)

1110 SW 28th Street
(Address)

Cape Coral, FL 33914
(City/State and Zip Code)

For further information concerning this matter, please call:

Juergen Hartwich at 239, 573-9601
(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

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Carsten + Jacqueline Uwira, 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 09/20/2006 and assigned
Florida document number LO6000092442

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

German Crepes House, LLC

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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Dr. Juergen Hartwich

New Registered Office Address:

1110 SW 28th Street

(Enter Florida street address)

Cape Coral

(City)

Florida

33914

(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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

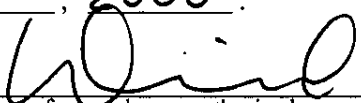
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated October 23, 2008


Signature of a member or authorized representative of a member

Juergen Hartwich
Typed or printed name of signee

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA