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D. BRUCE

DEC 27 2007

EXAMINER

SUBJECT: GHIVESVILLE DE CI GREGO LLO
(Name of Limited Liability Company)
The england Autolog & Amendana and Core of Locked Core William
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
reaso return an correspondence concerning this matter to the following.
n
DONNE PROCESSIT
MICHAN 140001
GANESVILLE DELI GROUP LLC
ARTHUR PARSONT GAINES (Name of Person) DELI GROUP LLC MIDTOWN BARTGRILL
(Firm/Company)
\wedge .
1250 W. LININERSITY ANG
1250 W. UNIVERSITY AVE
City/State and Zip Code) City/State and Zip Code)
(City/State and Zip Code) AHAS SSTA
SA N
For further information concerning this matter, please call:
Applica PARCALT 250 212-0519 75 3 17
ARTHUR PARSONT at 353 213-8559 5 5 (Area Code & Daytime Telephone Number) 5
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\sum \\$30.00 Filing Fee & \sum \\$55.00 Filing Fee & \sum \\$60.00 Filing Fee,
Certificate of Status Certified Copy Certificate of Status &
(additional copy is enclosed) Certified Copy
(head convise 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

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A	Florida Limited Liability Company)	
The Articles of Organization for this Limited Li Florida document number		J, 16, 200 Jand assigned
This amendment is submitted to amend the following	owing:	72
A. If amending name, enter the new name of		07 DEC 27 SECRETAR LLAHASS
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability Company,"	"the designation "DLC" or the abbreviation
B. If amending the registered agent and/or the new registered of		records, enter the name of the new
Name of New Registered Agent: New Registered Office Address:		ARSONT CI GROUP LLC KERSITY AVIE Florida street address)
	GAINESUI'LLE (City)	, Florida <u>32 60 1</u> (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 Type of Action Address Title ☐ Add **∏** Remove Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary. ember or authorized representative of a member

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00