L070000001742

(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.				

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05/02/11--01001--016 **25.00



D. BRUCE

APR 29 2011 NO \$

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 15, 2011

CHARLES M. HURLEY 127 SE PARKER ROAD MAYO, FL 32066

SUBJECT: MAYO CUSTOM CUTS, LLC

Ref. Number: L07000061742

FILED

11 APR 28 PM 4: 08

STATE STATE

4,1, 1

We have received your document for MAYO CUSTOM CUTS, LLC, however, upon receipt of your document no check was enclosed. Please return your document along with a check or money order made payable to the Department of State for \$25.00.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 011A00009197

COVER LETTER

TO: Registration S Division of G						•
SUBJECT:	MAYO CU	STOM CUTS LLC				
SUBJECT:		ited Liability Company				
	of Amendment and fee(s) are su	-				
	(CHARLES M HURLEY				
		Name of Person		•		
	MAYO CUSTOM CUTS LLC				4	
		Firm/Company			A	14 S.P.W.
	12	27 SE PARKER ROAD		HASS	APR 28	-
		Address		M-c		1 - 2 - 3
		MAYO FL 32066		1013 115.31	80 :t ka	
,	mihurley E-mail address:	City/State and Zip Code 111 D Yahao Com to be used for future annual report notifica	tion)	TATE	0	
For further information	concerning this matter, please	•	ŕ			
Charlie 1	m. Hurley of Person	at (<u>386) 294-1624</u> Area Code & Daytime T	elephone Numbe	<u></u> .		
Enclosed is a check for	the following amount:					
	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ate of Statu		ed)
	LING ADDRESS:	STREET/COURIER	R ADDRESS:			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		A CUTS LLO			
(<u>Name of the Limited Lia</u> (A Flo	bility Company rida Limited Lia	as it now appea bility Company)	rs on our records	<u>r</u>)	
The Articles of Organization for this Limited Liabil	lity Company w	vere filed on	JUNE 12 20	007 and a	ssigned
Florida document numberL070006174	2				
Tiorida document namost	·				
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	<u>limited liabili</u>	ity company he	<u>re</u> :		
MAYO CUSTOM	CUTS & SM	OKED SAUS	SAGE LLC		
The new name must be distinguishable and end with th	e words "Limite	d Liability Comp	any," the designat	ion "LLC" or th	e abbreviation
"L.L.C."				¥8 =	2
Enter new principal offices address, if applicable	e:				2 4
(Principal office address MUST BE A STREET A	DDRESS)			\$ 1 A	
				ss⊋ α	- 0

Enter new mailing address, if applicable:				LON S	- 6.3
(Mailing address MAY BE A POST OFFICE BO)	<i>X</i>)				Š
	_				
B. If amending the registered agent and/or a			our records, <u>er</u>	ter the name	of the new
registered agent and/or the new registered office	address here:				
			· /		
Name of New Registered Agent:	char	4 m (/	July		<u> </u>
New Registered Office Address:	127	S.E. Po	arker K	<u>{</u> ძ	
		Ei	nter Florida stree	et address	
_	180	WO	, Floric		<u>2066</u>
		City	· ——	Zip Co	ode

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 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 -

<u> Fitle</u>	<u>Name</u>	Address	Type of Action
MGRM	M JUNE HURLEY	127 SE PARKER ROAD MAYO FL 32066	Add ☐ Remove .
			Add Remove
 			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter change(s	here: (Attach additional sheets, if necessary)	28 7
_		FORJOA	f: U
Dated	APRIL 4TH , 2011	<u>l</u>	
	Chark	moderate	
	Signature of a member or	authorized representative of a member LES M HURLEY	
		printed name of signee	

Page 2 of 2

Filing Fee: \$25.00