# 07000066773

(Requestor's Name)		
(Address)		
(Address)		
(Cit	ry/State/Zip/Phone	<del>)</del> #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
		,

Office Use Only



900136467589

10/06/08--01017--013 \*\*25.00

SECRETARY OF STATE OF VIVISION OF CORPORATIONS

08 OCT - 6 AM 8: 20

J. BRYAN

OCT -7 2008

**EXAMINER** 



### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 19, 2008

BARBARA W. ULMAN SKID'S PUB, LLC 2810 E. BEARSS AVE TAMPA, FL 33613

SUBJECT: SKID'S PUB, L.L.C. Ref. Number: L07000066773

OBOCT - 6 AM 8: 20

Upon receipt of your letter no document was found. Please send your document with fees due.

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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 308A00050889

September 16, 2008 . \_\_

Florida Department of State Secretary of State, Division of Corporations P. O. Box 8700 Tallahassee, FL 32314

Re: Skid's Pub, LLC, FEI number 593110159

L07-66773

Sirs:

As of the date of this letter, please note the changes as stated in the Minutes filed 9/16/08.

Attached Minutes show that ownership is now in the names of William D. Spence and Barbara W. Ulman. Jeffrey T. Cox and Frank M. Ulman have been removed from ownership. All other information remains the same.

Thank you for your attention to this matter.

Barbara W. Ulman

Manager/Member, Secretary and Registered Agent

SKid's Pub, LLC 2810 & Beaks Aue. Tampa, FL 33613 SECRETARY OF STATE OF CORPORATIONS

# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Skids Pub 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:	,
Bonbana W. Ulman (Name of Person)	
5Kid's Pub, LLC (Firm/Company)	
- 3810 E. Bears Ave.	38
TAMPA, FL 33613	CRETARY COR
- Lactora 1 Pman at (813 971 - 0660	PORATIONS
(Area Code & Daytime Telephone Number)  Enclosed is a check for the following amount:  \$25.00 Filing Fee \$25.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  (Area Code & Daytime Telephone Number)  \$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

Skid= Pul	b, LLC
(Name of the Limited Liability Cor (A Florida Limit	mpany as it now appears on our records.) ted Liability Company)
The Articles of Organization for this Limited Liability Comp	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	liability company here:
The new name must be distinguishable and end with the words "L.L.C."	'Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	80 B0 S
(Principal office address MUST BE A STREET ADDRESS	S C SEC
·	- 97 n
Enter new mailing address, if applicable:	<u> </u>
• • • •	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	d office address on our records, enter the name of the new here:
Name of New Registered Agent:	
New Registered Office Address:	(Enter Florida street address)
,	·
·	, Florida (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.

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Name** Address Type of Action **Title** MERM MEKM Remove 🗖 Remove ☐ Add Remove Add 🗖 Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

Typed or printed name of signee

800G

Dated\_

Page 2 of 2

Signature of a member or authorized representative of a member

M 6 KM & Reg. agent

Filing Fee: \$25.00