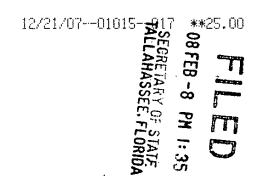
107000075766

(Requestor's Name)
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D. BRUCE

FEB 0 8 2008

EXAMINES



COVER LETTER

TO: Registration Section 'Division of Corporations
SUBJECT: E & J Liquor and Pool Hall RLC. (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:
Zena Wiltshire
Zena Wiltshire (Name of Person) El J Liguer and Pool Hall RCC (Firm/Company)
GL.Portel (Address) (City/State and Zip Code) ASSET AND SERVICE STATES AND SERVICE STAT
For further information concerning this matter, please call: Zena Wiltshire at 305, 759 6502
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee \$\$55.00 Filing Fee \$\$Certificate of Status \$\$Certified Copy (additional copy is enclosed) \$\$60.00 Filing Fee, \$\$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



December 24, 2007

JADE WILTSHIRE 196 NW 89 ST EL PORTAL, FL 33150

SUBJECT: E & J LIQUOR AND POOL HALL LLC

Ref. Number: L07000075766

We have received your document for E & J LIQUOR AND POOL HALL LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

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: 607A00071418 SEGRETARY OF STATE O

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

$E \leftarrow J$	Liguer	and too	1 Hall	LLC	<u>.</u>
(Name of the Limite	<mark>ed Liability Company a</mark> (A Florida Limited Liabi	s it now appears on lity Company)	<u>our records.</u>)	1	
The Articles of Organization for this Limited	Liability Company we	re filed on <u>Ju</u>	Jy23	200 7 _{and}	assigned
Florida document number <u>LD 700</u>	00757.66	•	•	JAKE SE	
This amendment is submitted to amend the fo	ollowing:			8 FEB -8 EGRETARY	
A. If amending name, enter the new name	of the limited liability	company here:	ř: F S	PH I:	
The new name must be distinguishable and end v "L.L.C."	with the words "Limited	Liability Company,"	the designate	LL C hor t	he abbreviation
B. If amending the registered agent and registered agent and/or the new registered		address on our	records, <u>ent</u>	er the nam	e of the nev
Name of New Registered Agent:	ZEN	A WI	LTSH	IRE	
New Registered Office Address:	196 1	1 w 89 c	ST · Florida streat	t addrass)	
		(Enter Purtel City)	, Florida	$\frac{32}{(Zip)}$	S/50 .

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** Marager-Zena Wiltshire Remove ☐ Add □ Remove Remove Remove Add Remove \neg Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00