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- (R	lequestor's Name)	
(A	ddress)	
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(0	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
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(Document Number)		
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EXAMINER



S. HAWKES

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EXAMINED





January 12, 2010

ARTHUR DECARO 1436 SR 436 1120 CASSELBERRY, FL 32707

SUBJECT: BLARNEYS TAVERN LLC

Ref. Number: L07000081435

We have received your document for BLARNEYS TAVERN 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):

You can only have one registered agent on your LLC.

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) 245-6955.

Letter Number: 210A00000945

Suzanne Hawkes Regulatory Specialist II

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Blarneys TAVERN LLC Name of Limited Liability Company			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Arthur DeCaro & Ana M DeCARO Name of Person			
Blarneys TAVERN LLC Firm/Company			
1436 SR436 # 1120 Address			
Casselbery FL 32707 City/State and Zip Code			
Artie FBR Q Jahoo. com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Arthur Decaro (321) 228-3384 Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: MAILING ADDRESS:			
Registration Section Registration Section Division of Corporations Division of Corporations			
Clifton Building P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301			
Enclosed is a check for the following amount:			
\$25 Filing Fee \$\ \sum \\$55 Filing Fee & Certified Copy			

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

Blarneys T	AVERO LLC lability Company as it now appears on our records.) lorida Limited Liability Company)
(A F	lorida Limited Liability Company)
The Articles of Organization for this Limited Liab	iability Company as it now appears on our records.) lorida Limited Liability Company) oility Company were filed on 08/08/2007 and assumed 08/08/3007
This amendment is submitted to amend the follow	ving:
A. If amending name, enter the new name of t	NIH
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicat	ole:
(Principal office address MUST BE A STREET	ADDRESS)
Enter new mailing address, if applicable:	/ V / I I
(Mailing address MAY BE A POST OFFICE B	<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office	
Name of New Registered Agent:	& Ana M. Decaro
New Registered Office Address:	1325 Sterling oaks Dr.
	Casselbery, Florida 32707 City Florida 32707 Zip Code
New Registered Agent's Signature, if changing Re	gistered 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.

in 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 **Address Type of Action Title Name** MGRM Arthur Decaro □ Add Remove ___Add □Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated_ Typed or printed name of signce

Page 2 of 2

Filing Fee: \$25.00