# L07000097856

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Certified Copies	Certificates	s of Status
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SECREDIANT OF LENT

B. BOSTICK

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### **COVER LETTER**

TO:

Registration Section
Division of Corporations

## URBAN STREET DEVELOPMENT, 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:

TIM PETRILLO

Name of Person

URBAN STREET DEVELOPMENT, LLC

Firm/Company

200 SW 2ND STREET

Address

FORT LAUDERDALE, FL 33301

City/State and Zip Code

jcampbell@therestaurantpeople.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TIM PETRILLO

954<sub>6</sub>618-0402

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$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

### URBAN STREET DEVELOPMENT, LLC

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

The Articles of Organization for this Limited Liability	Company were filed on 9/27/2007	and assigned
Florida document number L07000097856	<del></del> -	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Company," the designa	tion "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	<u></u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		2 2
B. If amending the registered agent and/or registered agent and/or the new registered office add		nter the name of the new
registered agent and/or the new registered office add	uress here.	
Name of New Registered Agent:		
New Registered Office Address:		
THOW REgistered Office Address.	Enter Florida stre	et address
	, Flori	da
	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.

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ALAN HOOPER	421 N ANDREWS AVE	<b>✓</b> Add
		FORT LAUDEDALE, FL 3330	1 Remove
			Add
			Remove
			Add
			Remove
		(7) (7) (7)	
		9	Remove
			_
			Remove
			_
			Add
			Remove

). Mamending any other information, e	enter change(s) here: (Attach additional sheets, if necessary.)
Dated NOVEMBER 5	2013
Signature	of a member or authorized representative of a member
TIM PETRILLO	
· · · · · · · · · · · · · · · · · · ·	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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