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EXAMINER



100131477301

06/24/08--01022--001 **55.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

LEO

COVER LETTER

Division of Cor	porations				
SUBJECT: Giovan	ni's Coal Fire Pizza	- Wellington Commons, L	.LC		
(Name of Limited Liability Company)					
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspondence	ondence concerning this matter	to the following:			
	Theodore M Sabarese				
		(Name of Person)			
Giovanni's Coal Fire Pizza, LLC					
		(Firm/Company)			
	4330 NE 22nd Ave				
		(Address)			
Fort Lauderdale, Florida 33308					
(City/State and Zip Code)					
For further information of	concerning this matter, please c	all:			
Ted Sabarese		at (954) 776-4229			
(Name	(Name of Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for t	he 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:

TO:

Registration Section`

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

FILED

2008 JUH 24 PM 1:39

SECKETARY OF CLAYE JALLAHASSEE, FLORIDA

Giovanni's Coal Fire Pizza - Wellington Commons, 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 <u>09/26/07</u>	and assigned
Florida document number L07000098464		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
Giovanni's Coal Fire Pizza - Village at Doral, LLC		
The new name must be distinguishable and end with the words "Lim "L.L.C."	ited Liability Company," the design	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	4330 NE 22nd Ave	
	Fort Lauderdale, Florida 333	08
Enter new mailing address, if applicable:		diges and the same of the same
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address here.	-	enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	(Enter Florida s	treet address)
	Flo	orida
	(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 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 **Type of Action** <u>Title</u> <u>Name</u> <u>Address</u> ☐ Add Remove ☐ Add Remove ____Add Remove ☐ Add Remove Add 🗖 Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated June 20 a member or authorized representative of a member John Amodeo Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00