

L07000105908

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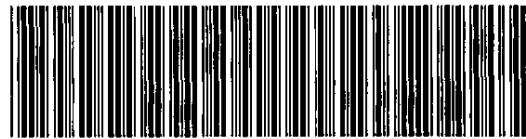
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TALLAHASSEE, FLORIDA

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C. LEWIS

JUL 19 2010

EXAMINER

LOTT & LEVINE
ATTORNEYS AT LAW

GEORGE J. LOTT
MICHAEL D. LEVINE (1953-1993)

DADELAND CENTRE, SUITE 1014
9155 SO. DADELAND BOULEVARD
MIAMI, FLORIDA 33156

TELEPHONE (305) 670-0700
FAX (305) 670-0701

July 15, 2010

AIRBILL NO 8731 8670 2155
SENT VIA FEDERAL EXPRESS

Registration Section
DIVISION OF CORPORATIONS
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: D Wade's Place Aventura, LLC

Dear Sir or Madam:

Enclosed please find the following:

- 1) Cover letter to D. Wade's Place Aventura
- 2) Articles of Amendment to Articles of Organization of D Wade's Place Aventura, LLC.

I have also enclosed a check in the amount of \$55.00 to cover the cost of the filing fee for the name change and Certified Copy.

If you have any questions, please do not hesitate to contact me.

Very truly yours,

GEORGE J. LOTT

Enc.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: D WADE'S PLACE AVENTURA, 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:

George J. Lott, Esq.

Name of Person

Lott & Levine

Firm/Company

9155 South Dadeland Boulevard, Suite 1014

Address

Miami, Florida 33156

City/State and Zip Code

lottlevine@bellsouth.net

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

For further information concerning this matter, please call:

George J. Lott, Esq.

Name of Person

at (305)

670-0700

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

FILED

2010 JUL 16 AM 11:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D WADE'S PLACE AVENTURA, 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 October 18, 2007 and assigned
Florida document number L07000105908.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

RESTAURANT PLACE AVENTURA, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address 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.

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>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	☐ Add
		_____	☐ Remove

_____	_____	_____	☐ Add
		_____	☐ Remove

_____	_____	_____	☐ Add
		_____	☐ Remove

_____	_____	_____	☐ Add
		_____	☐ Remove

_____	_____	_____	☐ Add
		_____	☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated _____

Angela Gennaro

Signature of a member or authorized representative of a member

Angela Gennaro

Typed or printed name of signee

2010 JUL 16 AM 11:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED