LOSODO 15981

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
L. SELLERS				
SEP 102008				
EXAMINER				

Office Use Only



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09/09/08--01020--002 **25.00

SECRETARY OF STATE

COVER LETTER

TO: Registration Se Division of Cor						
SUBJECT: Hot Dis	h L.L.C. (Name of Limi	ted Liability Company)				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Base Wight		<u></u>			
		(Name of Person)				
	Hot Dish Show Intercorporated					
		(Firm/Company)				
	1172 South Dixie Highway Suite #625					
		(Address)				
	Coral Gables, Florida 33	146				
		(City/State and Zip Code)				
For further information of	concerning this matter, please c	all:				
Base Wight		at (727 ₎ 480-6054				
(Name of Person) (Area Code & Daytime Telephone Num			'elephone Number)			
Enclosed is a check for the	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 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

Hot Dish L.L.C.				
(Name of the Limited	Liability Compar Florida Limited L	n <mark>y as it now appears on our</mark> iability Company)	records.)	
The Articles of Organization for this Limited L Florida document number L08000015981	iability Company	were filed on 2/13/08		and assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name of	of the limited liab	ility company here:		
The new name must be distinguishable and end wi "L.L.C."	th the words "Limi	ted Liability Company," the	designation "LLC	" or the abbreviation
Enter new principal offices address, if applic	1172 South Dixie Highway			
(Principal office address MUST BE A STREET ADDRESS)		Suite #625		
		Coral Gables, Florida 33	3146	
Enter new mailing address, if applicable:	1172 South Dixie Highway			
(Mailing address MAY BE A POST OFFICE	BOX)	Suite #625		
		Coral Gables, Florida 33	3146	
B. If amending the registered agent and registered agent and/or the new registered of	•		ords, enter the	
Name of New Registered Agent:	Base Wight			3. 80 3
New Registered Office Address:	1172 South D	ixie Highway Suite #625	77. 77.	
		(Enter Fio)	rida street addre	
	Coral Gables	(0)	, Florida <u>33146</u>	
		(City)	3	(ZipGode) ⊹ ယ
New Registered Agent's Signature, if changing	Registered Agent:	:	حذ	

(If Changing Registered Agent, Signature of New 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, Thereby confirm that the limited liability

company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Base Wight	1172 South Dixie Highway Suite #625	Add Remove
		Coral Gables, Florida 33146	
MGRM_	Mariano Lora	1172 South Dixie Highway	Add Remove
		Suite #625 Coral Gables, Florida 33146	
MGRM	Peter M. Barbee	7343 River Country Drive Weeki Wachee, Florida 34607	Add Remove
		FIGEN FIGURES, 1 MICH STOD	
MGRM	Jeffery R. Burns	14375 Mayer Lake Circle Clearwater, Florida 33760	Add
		Older Walder Floring Co. Co.	
MGRM	Frankie S. Winsett	14375 Mayer Lake Circle Clearwater, Florida 33760	Add
			Add
			Remove
D. If amen	ding any other information, enter	r change(s) here: (Attach additional sheets, if necess	ary.)
_			OB S
Dated Mono	lay, September 8 ,	2008	FIL SEP -9
	Signature	member or authorized representative of a member	
	Base Wight	memora of audiorized representative of a memora	12: 53
		Typed or printed name of signee	

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Filing Fee: \$25.00