

LO8000042435

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

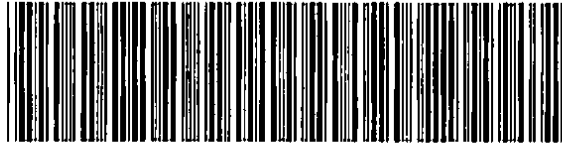
(Business Entity Name)

(Document Number)

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JAN 09 2020
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pete and Shorty's on Park, LLC

Name of Limited Liability Company

RECEIVED TALLAHASSEE
DIVISION OF CORPORATIONS
19 DEC -2 AM 9:50

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark Maurer

Name of Person

Pete and Shorty's on Park, LLC

Firm/Company

7402 49th St N

Address

Pinellas Park FL 33781

City/State and Zip Code

mark@peteandshortys.com

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

For further information concerning this matter, please call:

Mark Maurer

727 549-8000
at ()

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**

Pete and Shorty's on Park, LLC

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

FILED
CLERK OF STATE
DIVISION OF CORPORATION
19 DEC -2 AM 9:50

The Articles of Organization for this Limited Liability Company were filed on 4/29/2008 and assigned
Florida document number L08000042435.

This amendment is submitted to amend the following:

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

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

Enter new principal offices address, if applicable:

7402 49th Street N

(Principal office address MUST BE A STREET ADDRESS)

Pinellas Park, FL 33781

Enter new mailing address, if applicable:

7402 49th Street N

(Mailing address MAY BE A POST OFFICE BOX)

Pinellas Park, FL 33781

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:

Mark Maurer

New Registered Office Address:

7402 49th Street N

Enter Florida street address

Pinellas Park

, Florida 33781

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member


| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-----------------|---|--|
| MGR | Mark Maurer | 7402 49th Street N Pinellas Park, FL 33781 | <input checked="" type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | Wilson Williams | 107 Hampton Road #120 Clearwater FL 33759 | <input type="checkbox"/> Add |
| | | | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AMBR | Edgar West | 107 Hampton Road #120 Clearwater FL 33759 | <input type="checkbox"/> Add |
| | | | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AMBR | Wilson Williams | 107 Hampton Road #120 Clearwater FL 33759 | <input type="checkbox"/> Add |
| | | | <input checked="" type="checkbox"/> Remove |
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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

(b) The 90th day after the record is filed.

Dated 11/27/19, 1



Signature of a member or authorized representative of a member

Mark Maurer

Typed or printed name of signee