

# L08000048824

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

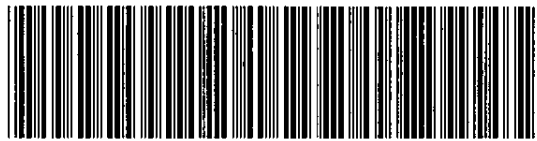
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS

FEB 2 2009

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Raviolis Italian to go shop 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:

Timothy J Suppes SE  
(Name of Person)

Raviolis - Italian to go shop  
(Firm/Company)

4 Lake ct  
(Address)

ocala FL 34472  
(City/State and Zip Code)

For further information concerning this matter, please call:

Timothy J Suppes SE at (352) 680 1023 / 352 342 6010  
(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

FILED

2009 JAN 30 PM 3:10

RAVIOLI'S Italian to go shop

(Present Name)

(A Florida Limited Liability Company)

SECRETARY OF STATE  
PALM BEACH COUNTY, FLORIDA

FIRST: The Articles of Organization were filed on MAY 16 08 and assigned document number L08000048824.

SECOND: This amendment is submitted to amend the following:

New name

Bellacini's Italian to go Shop LLC

Dated JAN 27, 2009.



Signature of a member or authorized representative of a member

Timothy J Suppes SE

Typed or printed name of signee