08000103460

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COVER LETTER

TO: Registration S Division of Co.						
SUBJECT: Newbe	rry Road Kazbor's, l				0	3
	(Name of Lim	ited Liability Company)				
	Amendment and fee(s) are sub	_				
	Barbara Wilhite					
	*	(Name of Person)				
	Carpenter & Roscow, P.	Α.		₹	21	
		(Firm/Company)		SECRE	2008 NOY 14 PM 4: 20	-
	5608 NW 43rd Street			TAY AS	X	404 g=1
		(Address)		RETARY OF		r
	Gainesville, Florida 3265			FLC ES1	عد ب	Ţ
		(City/State and Zip Code))F STATE . FLORIDA	: 20	
For further information	concerning this matter, please c	all:				
Barbara Wilhite		at (352) 373-7788				
(Name of Person)		(Area Code & Daytime T	elephone 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 Filin Certificate Certified ((additiona	of Status Copy		1)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle			

. ;

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Newberry Road Kazbor's, LLC (<u>Name of the Limited Liability Con</u> (A Florida Limit	npany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Comp. Florida document number L08000103460		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
Fletcher's Newberry Road, LLC		
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Company," the designation	_ <u></u>
Enter new principal offices address, if applicable:		Z008 NOV
(Principal office address MUST BE A STREET ADDRESS	3)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		20 TE 10A
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		er the name of the new
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 Type of Action <u>Address</u> **Title** <u>Name</u> _ Add Remove 🗖 Remove **7** Add Remove Add Emove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2008 Dated November 11

Typed or printed name of signee

George E. Fletcher

Signature of a member or authorized representative of a member

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Filing Fee: \$25.00