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(Requ	iestor's Name)	
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EXAMINER

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2012 JAN -3 PM 3 PB SEGRETARY OF STATE ALLAHASSEE, FLORIGA

COVER LETTER

TO:	Registration S Division of Co					
SUBJE	СТ:	Belke Fam	ily Holdings, LLC			
		Name of Limi	ted Liability Company	· · · · · · ·		
		Amendment and fee(s) are sub	-			
Please r	eturn all corresp	ondence concerning this matter	to the following:			
	David C. Belke					
Belke Family Holdings, LLC Firm/Company 440 Red Hawk Drive						
		Belk	e Family Holdings, LLC			
		Firm/Company	· · · · · ·			
		4	140 Red Hawk Drive	ALL	2012	
	Address		A P	JA	-η	
	Jupiter, Florida 33477 City/State and Zip Code				2012 JAN -3	*******
				ير ند ت الله		
dbelke			@martinsrestaurants.com o be used for future annual report notificat	ion)	₩	O
For furt	her information	concerning this matter, please c	•		8 5	
	Da	avid C. Belke	at (770 _{a)} 59	5-9600		
Name of Person		of Person	Area Code & Daytime Telephone Number		•	
Enclose	d is a check for t	he following amount:				
₹2 5.	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 St Certified Copy (additional copy	atus &	ed)
MAILING ADDRESS: Registration Section			STREET/COURIER Registration Section	ADDRESS:		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

;

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Belke	family H	oldings LL	<u>.</u>
(Name of the Limited Liab (A Flori	lity Company as it no da Limited Liability C	ow appears on out records ompany)	.)
The Articles of Organization for this Limited Liability	y Company were file	d on 11-14-0	8 and assigned
Florida document number <u>Lo8-106214</u>			
This amendment is submitted to amend the following	 		
A. If amending name, enter the new name of the l	imited liability com	pany here:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liabili	ity Company," the designati	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:			IZ JA
(Principal office address MUST BE A STREET AD	DRESS)		ASS 4
Enter new mailing address, if applicable:			6
(Mailing address MAY BE A POST OFFICE BOX)			
			
B. If amending the registered agent and/or req	gistered office addr ddress here:	ress on our records, <u>en</u>	ter the name of the new
			,
Name of New Registered Agent:			
New Registered Office Address:			
		Enter Florida street	address
_		, Florida	
	Citv		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 Title **Name Address Type of Action** Martha P. Belke MGR 440 Red Hawk Drive ☐ Add Jupiter, Florida 33477 √ Remove ☐ Add ☐ Remove Add 🔲 Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) December 28 2011 Dated ____ Signature of a member or authorized representative of a member David C. Belke Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00