

#L08000107316

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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FILED
11 SEP 28 PM 12:27
CLERK OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

SEP 29 2011



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 19, 2011

CHOMP DESIGNS, LLC
CRYSTAL B PARKER
1727 BRACKENHURST PLACE
LAKE MARY, FL 32746

SUBJECT: CHOMP DESIGNS, LLC
Ref. Number: L08000107316

We have received your document for CHOMP DESIGNS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 611A00021597

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Chomp Designs, 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:

Crystal B. Parker
Name of Person

Chomp Designs, LLC
Firm/Company

1727 Brackenhurst Place
Address

Lake Mary, Florida 32746
City/State and Zip Code

boscosmom@earthlink.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Crystal B. Parker at (407) 323-5120
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

11 SEP 28 PM 12: 27

Chomp Designs, LLC

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

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on November 18, 2008 and assigned
Florida document number L08000107316.

This amendment is submitted to amend the following:

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

Chomp, LLC

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

Enter new principal offices address, if applicable:

1727 Brackenhurst Place

(Principal office address MUST BE A STREET ADDRESS)

Lake Mary, FL 32746

Enter new mailing address, if applicable:

same as above

(Mailing address MAY BE A POST OFFICE BOX)

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:

Crystal B. Parker

New Registered Office Address:

1727 Brackenhurst Place (new address)

Enter Florida street address

Lake Mary

Florida

32746

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.

Crystal B. Parker
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:

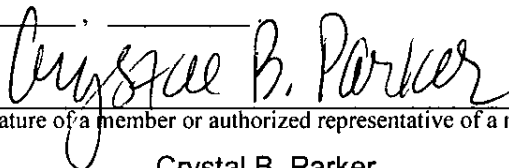
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated 9/13/11



Signature of a member or authorized representative of a member

Crystal B. Parker

Typed or printed name of signee