

LO8000115724

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

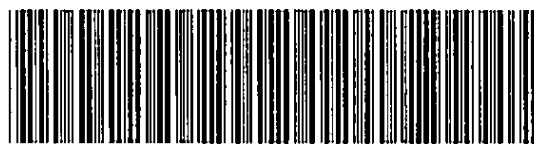
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
19 DEC 11 PM 3:29

JAN 14 2020  
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# COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** FISH HOUSE RESTAURANT LLC

Name of Limited Liability Company

FILED  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATIONS  
19 DEC 11 PM 3:29

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

Please return all correspondence concerning this matter to the following:

CLAYTON B. STUDSTILL

Name of Person

THE STUDSTILL LAW FRIM PLLC

Firm/Company

326 REID AVENUE

Address

PORT ST JOE FL 32456

City/State and Zip Code

clayton@thestudstilllawfirm.com

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

For further information concerning this matter, please call:

Clayton Studstill

850 229-8800  
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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

FISH HOUSE RESTAURANT LLC

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

FILED  
MAY BE  
DIVISION OF CORPORATIONS  
19 DEC 11 PM 3:29

The Articles of Organization for this Limited Liability Company were filed on 12/22/2008 and assigned Florida document number L 08000115724.

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:

3006 HWY 98

(Principal office address MUST BE A STREET ADDRESS)

MEXICO BEACH, FL 32456

Enter new mailing address, if applicable:

PO BOX 157

(Mailing address MAY BE A POST OFFICE BOX)

APALACHICOLA, FL 32329

**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:

BARBARA SANDERS

New Registered Office Address:

80 MARKET STREET

*Enter Florida street address*

APALACHICOLA

Florida

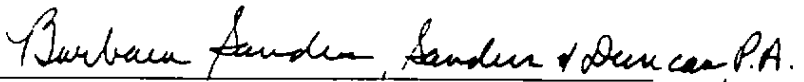
32320

*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.*

  
Barbara Sanders, Sanders & Deen, P.A.  
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	NICHOLE SPILDE	1206 SLEEPY HOLLOW ROAD	<input checked="" type="checkbox"/> Add
		MEXICO BEACH, FL 32456	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	KAYLA SPILDE	168 5TH STREET	<input checked="" type="checkbox"/> Add
		APALACHICOLA, FL 32320	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	CLAYTON B STUDSTILL	326 REID AVENUE	<input type="checkbox"/> Add
		PORT ST JOE, FL 32456	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
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