

209000004551

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

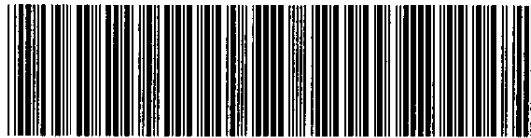
Special Instructions to Filing Officer:

A. LUNT

FEB -9 2009

EXAMINER

Office Use Only



900142973799

02/06/09--01016--001 **25.00

FILED
2009 FEB -6 PM 2:46
TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **BW'S BAR-B-Q GRILL AND SPORTS CLUB 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:

STEPHEN E ROBERTS

(Name of Person)

STEPHEN E ROBERTS, P.A.

(Firm/Company)

1414 GAY ROAD, SECOND FLOOR

(Address)

WINTER PARK, FL 32789

(City/State and Zip Code)

RECEIVED
TALLAHASSEE, FLORIDA

2009 FEB -6 PM 2:46

FILED

For further information concerning this matter, please call:

STEPHEN E ROBERTS

(Name of Person)

at (407) 923.4000

(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

Page 1 of 2

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
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

2009 FEB -6 PM 2:46
FALLINGBASSSEE, LORICA

FILED

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

Dated 01/15, 2009

Signature of a member or authorized representative of a member
STEPHEN E ROBERTS

Typed or printed name of signee