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COVER LETTER

TO:

TO: Registration So Division of Cor			at .
CUDINGS		RANCH, LLC	
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		LARRY BOYETTE	
		Name of Person	
	F	BAR B-B RANCH, LLC	
		Firm/Company	
	32	151 BERMONT ROAD	
		Address	
	уч	JNTA GORDA, FL 33982	
		City/State and Zip Code	
	E-mail address: (to be used for future annual report no	otification)
For further information c	oncerning this matter, please ca	all:	
LARRY B	OYETTE	941 628-1126 at ()	
Name o	of Person		ime Telephone Number
Enclosed is a check for the	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 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address:	Castion
Registration : Division of C		Registration S Division of C	
P.O. Box 632	27	The Centre of	Tallahassee
Tallahaccee	FI 32314	2415 N. Man	roe Street Suite \$10

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

В.	ar b-b ranch, llc 202	100 -8 PJ 59	26
(Name of the Limited Liabil (A Florid	ity Company as it now appears a Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability C	Company were filed on	01/22/2009	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	nited liability company her	<u>·e</u> :	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the de	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADD	RESS)		
	 .		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our re	cords, <u>enter the na</u>	ne of the new registo
Name of New Registered Agent:			 .,
New Registered Office Address:	Enter Florid	da street address	
		Florida	
	City	1 1011014 _	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.

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> γ (10) -1 PH 5: 26	Type of Action
SEC	KIMBERLEY M BOYETTE	32151 BERMONT ROAD	□Add
		PUNTA GORDA, FL 33982	=Remove
		**************************************	□Change
SEC	ERIN DJAK	166 FITZSIMONS STREET	■Add
		PORT CHARLOTTE, FL 33954	□Remove
			☐Change
			🗆 Add
			□Remove
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in effective date is listed, the date	edate of filing:
ecord specifies a delayed effectis filed.	re date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
SEPTEMBER 17	

Typed or printed name of signee