

LO910000015142

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

09 OCT 16 AM 8:47

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Change of Name, Principle, Mailing & Manager Address
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:

Mr. Azim Neiro

Name of Person

DONER KING

Firm/Company

7400 North Nebraska Ave

Address

Tampa, Florida 33604

City/State and Zip Code

azim-neiro@web.de

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

For further information concerning this matter, please call:

Azim Neiro

Name of Person

at (813)

443-6945

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 24, 2009

MR. AZIM NEIRO
7400 NORTH NEBRASKA AVENUE
TAMPA, FL 33604

SUBJECT: DONER KING, LLC
Ref. Number: L09000015142

We have received your document for DONER KING, 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 name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 109A00021474

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

DÖNER KING LLC,

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

The Articles of Organization for this Limited Liability Company were filed on 02/13/2009 and assigned
Florida document number L09000015142

This amendment is submitted to amend the following:

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

DÖNER KING 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: 7400 North Nebraska Ave
(Principal office address MUST BE A STREET ADDRESS) Tampa, Florida 33604

Enter new mailing address, if applicable: 7400 North Nebraska Ave
(Mailing address MAY BE A POST OFFICE BOX) Tampa, Florida 33604

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: _____

New Registered Office Address: _____

Enter Florida street address

Florida

City

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

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TALLAHASSEE FLORIDA
SECRETARY OF STATE


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>
MGR	Azim Neiro	3578 MARLINSPIKE DRIVE TAMPA FL	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Azim Neiro	7172 Bonaventure Dr. Tampa, FL 33607	<input checked="" 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

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

Dated June 15 2009


Signature of a member or authorized representative of a member

Azim Neiro
Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE FLORIDA