## 109000038215

(Re	equestor's Name)	
(Ad	ldress)	······································
(A-)	ldress)	<u>.</u>
(Au	alessj	
(Cit	ty/State/Zip/Phone	e #)
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(Do	cument Number)	
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**EXAMINER** 

## **COVER LETTER**

	Registration Sectio Division of Corpor						
SUBJECT	Γ:	PH FOOD 8	& BEVERAGE,LLC	:			
		Name of Lim	ited Liability Company				
The enclos	sed Articles of Ame	endment and fee(s) are su	bmitted for filing.				
Please retu	ırn all corresponde	nce concerning this matter	r to the following:				
	_	STACEY-ANN WHYTE					
			Name of Person				
		M.F	. & ASSOCIATES, IN	C			
	•		Firm/Company				
	8409 N MILITARY TRAIL, 119		119				
	•		Address				
•		PALM B	EACH GARDENS, FL	33410			
	-		City/State and Zip Code				
		E-mail address: (	to be used for future annual repo	ort notification)	型の	2699	
For further	· information conce	eming this matter, please o	eall:		SAHA NETW	2099 AUG 2	يودون منجون منجون
		ANN WHYTE	at (561_)	691-1100	%% ~m~ <b>∞</b> m—	26 F	\$   ************************************
	Name of Per	son	Area Code &	Daytime Telephone Number	FLORI	PH 12: 5	(Secondary
Enclosed i	s a check for the fo	llowing amount:			<b>5</b>	ဘ	
\$25.00	Filing Fee	]\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	\$60.00 Filin Certificate aclosed) Certified (additional	e of Statu Copy		:d)
	Registration	Corporations 327	Registration Division of Clifton Build	Corporations			

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	<u>&amp; BEVERAGE, LI</u>		=	
( <u>Name of the Limited Liability</u> (A Florida L	Company as it now appea imited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Co	ompany were filed on	04/21/2009	and assig	ned
Florida document numberL0900038215	<b>_·</b> ·			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ted liability company her	<u>re</u> :		
The new name must be distinguishable and end with the word	ds "Limited Liability Compa	any," the designation	"LLC" or the abl	breviation
"L.L.C."			2009 FALL SET	
Enter new principal offices address, if applicable:			7 - 7 - TE	4417
(Principal office address MUST BE A STREET ADDR	ESS)		11.65 P	######################################
	· 		<u> (公文</u> の	
				A CONTRACTOR
Enter new mailing address, if applicable:			20 <b>20 20 20 20 20 20 20 2</b>	
(Mailing address MAY BE A POST OFFICE BOX)			10x	
		•	•	
B. If amending the registered agent and/or registe	ered office address on (	our records, <u>enter</u>	the name of	the new
registered agent and/or the new registered office addr	ess here:			
Name of New Registered Agent:				
Name of New Registered Agent.				
New Registered Office Address:	E.	ter Florida street ad		
	En	aer r toriaa street ad	uress	
<del></del>	City	, Florida _	Zip Code	<del></del>
	cuy		zip Coae	

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

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 Type of Action <u>Title</u> <u>Name</u> **Address MGR** ABU S. AHSAN 4100 ILEX COURT ✓ Add PALM BEACH GARDENS, FL 33410 🔲 Remove KAZI T. AHMED MGR 4122 WOODS EDGE CIRCLE □ Remove PALM BEACH GARDENS, FL 33410 MGR KAZI Z. HAIDER 4124 WOODS EDGE CIRCLE 🗹 Add APT. A Remove PALM BEACH GARDENS, FL 33410 BIDDUT K. SUTTRADHAR **MGR** 1517 S. 17TH AVENUE Remove Remove & O IT D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2009 Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00