## 6900039645

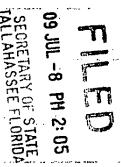
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Office Use Only



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N. O-8 2009

## **COVER LETTER**

TO: Registration Section Division of Corporations					
SUBJECT: COONUX Breeze Response And Lounge Like C Name of Limited Liability Company					
The enclosed Articles of Amendment and fee(s) are submitted for filing.					
Please return all correspondence concerning this master to the following:					
DENNA E DANIEL					
CoConut breeze Restarmant And Lounge L.L.					
4800 N-W 17th Court					
LauderHill F1. 33313					
City/State and Zip Code  Lown A Cocon with BL Com  B-mail address: (to be used for future appeal report spotification)					
For further information concerning this matter, please call:					
DONNA DANIEL DR Lodlyn Hinds 1954, 562865-954-903-5056  Name of Person  Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount:					
S25.00 Filing Fee S30.00 Filing Fee & S60.00 Filing Fee,  Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)  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 Sections
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

July 2, 2009

DONNA E. DANIEL 4800 N.W. 17TH COURT LAUDERHILL, FL 33313

SUBJECT: COCONUT BREEZE RESTAURANT AND LOUNGE LIMITED

LIABILITY COMPANY

Ref. Number: L09000039645

We have received your document for COCONUT BREEZE RESTAURANT AND LOUNGE LIMITED LIABILITY COMPANY and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Are you amending part B of the Amendment the Registered Agent it is signed but no new information.

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

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) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 909A00022777

faxing back

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Coconut Breeze Restaurant	And Lounge A	imited Dability Co	mpan
The Articles of Organization for this Limited Liability Company Florida document number $6900039645$	were filed on $4-24-6$	and essigned	
This amendment is submitted to smend the following:			
A. If smending name, gater the new same of the Hadded lieb	N/	4	
The new name must be distinguishable and end with the words "Lime"L.L.C."			
Enter new principal offices address, if applicable:	2960 NORTH	Federal Huy	
(Principal office address MUST RE A STREET ADDRESS)	Ft LAuderda	<u>le F1 33306</u> 25 8	
Enter new mailing address, if applicable:		CRETAL AHAM	
(Mailler address MAY BE A POST OFFICE BOX)		SSEE PR	
B. If amending the registered agent and/or registered of resistered agent and/or the new resistered office address by		SIPE SIPE SIPE SIPE SIPE SIPE	O
Name of New Registered Agent:	<del></del>	-	
New Registered Office Address:	1	•. 	
ATRICA MARKA APPRATE	. Enter Florida	street address	
<del></del>	Ctry	Zip Code	
New Registered Agent's Signature, if changing Registered Agent	<b>L</b>		

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 posttion 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, many visite in a star Lettered Accept

MGRM = Managing Member

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Menaging Managers being added or removed from our records: MGR - Manager

954 568 5571

Tide NG-RM	Name	Address	Type of Action
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Page 2 of 2

Filing Fee: \$25.00