109000043034

_ (Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	· · · · · · · · · · · · · · · · · · ·
(Ci	ty/State/Zip/Phone	2 #)
(0)	ty/Otate/Zip/Filon	σ π)
PICK-UP	☐ WAIT	MAIL
. (Bu	usiness Entity Nar	ne)
· (Do	ocument Number)	
(20		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
	50	87

Office Use Only



600185264616

09/13/10--01027--011 **175.00

10 SEP 13 PM 'T. ST

S. HAWKES

SEP 1 4 2010

EXAMINER

COVER LETTER

TO:	Registration S Division of Co				
SUBJI	ECT:	Bengel's	Burgers III, LLC		
3000			ted Liability Company		
The en	nclosed Articles of	f Amendment and fee(s) are sul	omitted for filing.		
Please	return all corresp	ondence concerning this matter	to the following:		
		Christopher Bengel			
			Name of Person		
		Ве	engel's Burgers III, LLC		
			Firm/Company		
	643 W Michigan St				
	Address				
			Orlando, FL 32805		
			City/State and Zip Code	 -	
		bber	ngel@floridaburgers.com		
For fu	rther information	E-mail address: (concerning this matter, please of	to be used for future annual report noticall:	fication)	
				702-5142	
		stopher Bengel of Person	at (407) Area Code & Daytin	ne Telephone Number	
Enclos	sed is a check for	the following amount:			
₹ 2	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$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		tration Section ion of Corporations Box 6327	STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	on orations enter Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bengel's Burg (Name of the Limited Liability Compa (A Florida Limited I	gers III, LLC ny as it now appears on our i Liability Company)	records.)
The Articles of Organization for this Limited Liability Company Florida document numberL0900043034	were filed on5/04	//2009 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	·
The new name must be distinguishable and end with the words "Lim "L.L.C."	ited Liability Company," the d	esignation "LECT or the abbreviation
Enter new principal offices address, if applicable:	643 W Michigan St	
(Principal office address MUST BE A STREET ADDRESS)	Orlando, FL 32805	# P P
Enter new mailing address, if applicable:	643 W Michigan St	55 ORIDA
(Mailing address MAY BE A POST OFFICE BOX)	Orlando, FL 32805	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		rds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Floria	da street address
•		Florida
	City	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 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 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 = Ma MGRM = I	anager Managing Member		
Title	<u>Name</u>	Address	Type of Action
			☐ Add
			☐ Add
			— — — — — — — — — — — — — — — — — — —
			T dd
,			Themove
			3 4
			Remove
			55 100 100 100 100 100 100 100 100 100 1
	-		Add Remove
			Add Remove
D. If amen	nding any other information, e	nter change(s) here: (Attach additional sheets,	if necessary.)
_			
_			,
_			
_	September 10	2010	
Dated	September 10		
	Signature	of a member or authorized representative of a memb	er
		Christopher Bengel Typed or printed name of signee	
		. J pou or printed timile or signee	

Page 2 of 2

Filing Fee: \$25.00