L09000W3533

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SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON
JUL 1 3 2010

EXAMINER

COVER LETTER

Division of Co	rporations		4	
SUBJECT:	MAKE'N T	HE DOUGH, L.L.C		
		nited Liability Company	35	
•				
The enclosed Articles of	Amendment and fee(s) are s	ubmitted for filing.	•	
Please return all correspo	ondence concerning this matt	er to the following:	, ·	
		DENISE KELESCENY	,	
		Name of Person		
	<u> </u>			**
•	**	Firm/Company		
	3	12 W INTERLAKE BLV	′ D	
		Address		
	<u> </u>	AKE PLACID, FL 3386	<u> </u>	
		City/State and Zip Code		
•	E mail addraga	michaelq5@live.com (to be used for future annual rep		
		•	ort notification)	
For further information of	concerning this matter, please	call:		••
DENIS	SE KELESCENY	at (_863)	441-4208	
Name o	f Person		Daytime Telephone Number	
5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1	
Enclosed is a check for the	ne following amount:			•
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55,00 Filing Fee & Certified Copy (additional copy is e		of Status &
				l copy is enclosed)

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAKE'N THE DOUG	H, L.L.C	
(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.)	-
(As notice Diffined Discounty)	·	•
The Articles of Organization for this Limited Liability Company were fi	led on05/01/2009	and assigned
Florida document numberL0900043533	•	
	r	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability co	mpany here:	
	- <u>.</u> .	•
The new name must be distinguishable and end with the words "Limited Liab"L.L.C."	ility Company," the designation	n "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	:	
		0 Sic
		E ZE
Enter new mailing address, if applicable:		TO FAR
(Mailing address MAY BE A POST OFFICE BOX)		78 A A A
Transition manifest value burns out of the burns		ST ST
		69 = 2
B. If amending the registered agent and/or registered office ad registered agent and/or the new registered office address here:	dress on our records, <u>ente</u>	er the name of the new
Name of New Registered Agent:		
New Registered Office Address:	i · · · · · · · · · · · · · · · · · · ·	
Trem Registered Office Address.	Enter Florida street	address
	. Florida	
City	, FIOTIQA	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 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 **Address** Title <u>Name</u> **ERICK KELESCENY** PRES 312 W INTERLAKE BLVD ☐ Add ✓ Remove LAKE PLACID, FL 33852 ☐ Add Remove Add 🗌 Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated . Signature of a member or authorized representative of a member DENISE KEKESCENY Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00