L09000057028

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Office Use Only



800170665418

800170565418 02/26/10--01034--009 **25.00

SEGRETIVEY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

MAR - 1 2010

EXAMINER

COVER LETTER

| TO: | Registration Section Division of Corport | | | | |
|---|--|--|--|-------------------|---|
| SUBJI | CT. | green day ca | fe Franchising LLC | | |
| 30 131 | , | | ted Liability Company | | |
| | | nendment and fee(s) are sub | - | | |
| | | | Chad Tomlinson | | |
| | | | Name of Person | ···· | |
| | | Tom | linson Investments LL | .C | |
| | | | Firm/Company | | |
| 1 | | | 022 W. Smith Street | | |
| | | | Address | | |
| | | | Orlando,FL32804 | | |
| | | | City/State and Zip Code | | |
| chad@greendaycafe.com E-mail address: (to be used for future annual report notification) | | | | | |
| For fu | ther information con | cerning this matter, please c | all: | | |
| | Chad | Tomlinson | at (407) | 383-200 | 04 |
| Name of Person | | | | Daytime Telephone | e Number |
| Enclos | ed is a check for the | following amount: | | | |
| \$25 | 5.00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is en | nclosed) | 60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| MAILING ADDRESS: | | STREET/C | OURIER ADDI | DFSS. | |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| · green d | ay cate Franchising Ll | <u>_C</u> | | |
|--|---|-------------------------|----------------|----------------|
| (<u>Name of the Limited Liai</u> (A Flor | pility Company as it now appear ida Limited Liability Company) | s on our records.) | | |
| The Articles of Organization for this Limited Liabili | ity Company were filed on | 06/11/2009 | and assig | ned |
| Florida document number <u>L09000057028</u> | <u>3 </u> | | | |
| This amendment is submitted to amend the followin | g: | | | |
| A. If amending name, enter the new name of the | limited liability company her | <u>e</u> : | | |
| The new name must be distinguishable and end with the "L.L.C." | words "Limited Liability Compa | my," the designation "L | LC" or the abl | breviation |
| Enter new principal offices address, if applicable | | | | |
| (Principal office address MUST BE A STREET A | DDRESS) | | | |
| | | | | <u> </u> |
| Enter new mailing address, if applicable: | | | 0 FEB | SIONE SIONE |
| (Mailing address MAY BE A POST OFFICE BOX | <u> </u> | | 26 | RE |
| | | | - 3 | 300 E |
| B. If amending the registered agent and/or r | egistered office address on (| our records, enter t | ne name of | the mev |
| registered agent and/or the new registered office | | · · | (2 | SKei |
| Name of New Registered Agent: | | | <u> </u> | |
| New Registered Office Address: | E | ter Florida street addi | | |
| | En | ier rioriaa sireet addi | ress | |
| - | City | , Florida | Zip Code | |
| | ٠, | | Ziji Couc | |

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 = Manager

| MGRM = M | lanaging Member | | |
|-------------|--|---|--|
| Title . | Name | Address | Type of Action |
| MGRM | green day Holdings LLC | 1022 W. Smith Street Orlando, FL 32804 | |
| <u>MGRM</u> | Chad Tomlinson | 1022 W. Smith Street Orlando, FL 32804 | Add Remove |
| MGRM | Teri Tomlinson | 3500 Wilder Lane Orlando, FL 32804 | Add Remove |
| MGRM | Joe Tomlinson | 3500 Wilder Lane Orlando, FL 32804 | Add Remove |
| MGR_ | Kiersten Main | 2817 Salisbury BLVD Winter Park, FL 32789 | NAdd VRemove |
| MGR | Heidi Walters | 501 Riviera Drive Altamonte Springs, FL 32701 | Add ∕Remove |
| D. If amend | ding any other information, enter chan | nge(s) here: (Attach additional sheets, if necessar | y.) |
| Dated | | per or authorized representative of a member | SECULIARY OF STATE SECULIARY OF STATE 10 FEB 26 PM 1: 13 |
| | Турс | Chad Tomlinson ed or printed name of signee | |

Page 2 of 2

Filing Fee: \$25.00