

209000061964

(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



000305210090

11/03/17--01009--015 \*\*25.00

FILED  
17 NOV - 3 AM 11:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. LEGGETT  
NOV - 3 2017

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** PIZZA DEPOT, LLC  
\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

TAMMY SZURCZYNSKI  
\_\_\_\_\_  
Name of Person  
  
\_\_\_\_\_  
Firm/Company  
  
1003 NW 28TH PLACE  
\_\_\_\_\_  
Address  
  
CAPE CORAL, FL 33993  
\_\_\_\_\_  
City/State and Zip Code  
  
TAMMY6776@GMAIL.COM  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TAMMY SZURCZYNSKI  
\_\_\_\_\_  
Name of Person at (716) 803-5230  
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|--|--|--|

**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**

PIZZA DEPOT, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 06/25/2009 and assigned Florida document number L09000061964.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

1003 NW 28TH PLACE

CAPE CORAL, FL 33993

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

TAMMY SZURCZYNSKI

New Registered Office Address:

1003 NW 28TH PLACE

Enter Florida street address

CAPE CORAL


City

Florida 33993

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	HARRY KALTSOUNIS	133 SW 36TH PLACE	<input checked="" type="checkbox"/> Add
		CAPE CORAL, FL 33991	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	DAWN KALTSOUNIS	133 SW 36TH PLACE	<input type="checkbox"/> Add
		CAPE CORAL, FL 33991	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	TAMMY SZURCZYNSKI	1003 NW 28TH PLACE	<input checked="" type="checkbox"/> Add
		CAPE CORAL, FL 33993	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

17 NOV -3 AM 11:03  
STATE STREET  
TALLAHASSEE FLORIDA

FILED  
17 NOV -3 AM 11:03  
ST. JOHNS COUNTY  
TALLAHASSEE FLORIDA

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

Dated October 31<sup>st</sup>, 2017

Signature of a member

Signature of a member or authorized representative of a member

Tammy Szurczynski  
Typed or printed name

Typed or printed name of signee