

LD9000077813

(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



600161752206

10/22/09--01021--001 **25.00

FILED
09 OCT 22 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. C. O'Brien OCT 23 2009

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Clearwater Pizza, 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:

Robert J. Rodriguez
Name of Person
Clearwater Pizza, LLC
Firm/Company
1617 N. Highland Ave
Address
Clearwater, FL 33763
City/State and Zip Code
pirateraver@msn.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert J. Rodriguez at (727) 461-9600
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$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

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

FILED

09 OCT 22 AM 11:00

CLEARWATER PIZZA, LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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 August 12, 2009 and assigned
Florida document number L09000077813.

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 end with 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)

1617 N. Highland Ave
Clearwater, FL 33763

X Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1617 N. Highland Ave.
Clearwater, FL 33763

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:

FRANK RODRIGUEZ

New Registered Office Address:

3333 Renaissance Blvd. Ste 209

Enter Florida street address

Bonita Springs, Florida 34134
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.

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Barrido, Roque C. Sr.	1924 Barrington Drive West Clearwater, Florida 33763	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
	Adalija De Ituronde		<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
	Anna I. Rodriguez		<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Robert J. Rodriguez	1617 N. Highland Ave. Clearwater, FL 33763	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

FILED
 09 OCT 22 AM 11:00
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Dated October, 2009


 Signature of a member or authorized representative of a member

Anna I. Rodriguez, Member
 Typed or printed name of signer