LU9000083114

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(Re	questor's Name)			
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Do	cument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
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B. KOHR SEP 1 6 2010 EXAMINER

COVER LETTER

TO: Registration Section of Corporation	on rations	g w e	to a grant
نو.			
SUBJECT: Golden Rui	e BBQ Franchising, LLC		
	Name of Limi	ted Liability Company	
			So Total
The enclosed Articles of Ar	mendment and fee(s) are sub	omitted for filing.	
Please return all correspond	lence concerning this matter	to the following:	OSED IN PAKERS
		Courtney Stubley	3 .
		Name of Person	
	Golde	n Rule BBQ Franchising, LLC	
		Firm/Company	
	. 7.	55 Grand Blvd #B105-307	
		Address	
		Miramar Beach, FL 32550	
		City/State and Zip Code	· · ·
		ourtney@goldenrulebbq.com	Wasse Views
	·	to be used for future annual report notifica	non)
For further information con	cerning this matter, please o	all:	
Courtney Stubley		at (850) 200-0323	
Name of P	erson	Area Code & Daytime T	elephone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	x \$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



GOLDEN RULE BBQ FRANCHISING, 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 ___08/27/2009_ and assigned Florida document number <u>L09000083114</u> 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: 755 Grand Blvd #B105-307 (Principal office address MUST BE A STREET ADDRESS) Miramar Beach, FL 32550 Enter new mailing address, if applicable: 755 Grand Blvd #B105=307 (Mailing address MAY BE A POST OFFICE BOX) Miramar Beach, FL 32550 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: Courtney Stubley Name of New Registered Agent: 755 Grand Blvd #B105-307 New Registered Office Address: Enter Florida street address

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.

Miramar Beach

City

If Changing Registered Agent, Signature of New Registered Agent

32550

Zip Code

Florida

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>	Address	Type of Action
MGRM_	Philip Stubley	755 Grand Blvd #B105-307 Miramar Beach, FL 32550	[X] Add Remove
MGRM	Courtney Stubley	755 Grand Blvd #B105-307 Miramar Beach, FL 32550	_X Add ☐ Remove
_MGRM	Chuck Cooper	171 Brooks St Suite F Ft Walton Beach, FL 32548	Add Remove
MGRM_	Jeffrey Miller	171 Brooks St Suite F Ft Walton Beach, FL 32550	Add X Remove
	· · · · · · · · · · · · · · · · · · ·	Add Remove 	
			Add Remove
D. If amend	ding any other information, enter (change(s) here: (Attach additional sheets, if necessary.)	_
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	irteenth of September	2010	
Dated <u>Th</u>		2010 . nember or authorized representative of a member	
		Courtney Stubley Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00