10000037893

•
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Prione #)
PICK-UP
(Business Entity Name)
(Document Number)
·
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
L. SELLERS
SEP - 7 2010
EXAMINER

Office Use Only



600184827076

09/02/10--01020--006 **25.00

SECRETARY OF STATE

10 SED - 2 DM 19. 5

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Good Times Pinellas, 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:
Eugene M. Myers Name of Person
Good Times Pinellas, LLC
9251 98th Ave
Seminole, FL 33777 City/State and Zip Code
trombetta@ tampabay. Tr. com E-mail address: (to be used for future aimual report notification)
For further information concerning this matter, please call:
Fugene M. Myers at (727) 254-6970 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount: \$\begin{align*} \begin{align*} \text{\$55.00 Filing Fee & } & \text{\$60.00 Filing Fee, } \text{\$Certificate of Status & } & \text{\$Certified Copy (additional copy is enclosed)} \end{align*} \$\$ \begin{align*} \text{\$60.00 Filing Fee, } & \text{\$Certified Copy (additional copy is enclosed)} \end{align*}

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

ed 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 04-08-2010 Florida document number L10000037893 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) 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: New Registered Office Address: Enter Florida street ac City 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member <u>Title</u> **Name Address Type of Action** Bontempo, Stephen A 14050 80th Ave N. Seminale, FL 33776 ☐ Add Remove \square \wedge dd ☐ Remove _ Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated ____ 8-33-13 Signature of a member or authorized representative of a member Myers
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00