## <u>L10000049352</u>

(Red	questor's Name)	-	
(Address)			
(Add	dress)		
(City	//State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates	s of Status	
Special Instructions to Filing Officer:			
<u> </u>			

Office Use Only



700181528957

06/07/10--01002--014 \*\*30.00

TO ACHIUWLEDGE SUFFICIENCY OF FILING DEPARTMENT OF STATE STAT

TILED TILED

T. HAMPTON

JUN - 7 2010

EXAMINER

## **COVER LETTER**

TO:	Registration S Division of Co				
SUBJI	ECT:	Fisher S	Seafood Market LLc	·_	
			ited Liability Company		
The en	closed Articles o	f Amendment and fee(s) are sul	omitted for filing.		
Please	return all corresp	ondence concerning this matter	to the following:		
			Gale F. Fisher		
	Name of Person				
Fisher Seafood Market LLC			LC		
Firm/Company					
		616 North Bronough St.			
	Address				
			Tallahassee, FL		
		· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code		
		bg	alefisher@yahoo.com to be used for future annual report n		
For fur	ther information	concerning this matter, please of	•	otification)	
	G	ale F. Fisher	at (_850 )	544-4428	
		of Person		rtime Telephone Number	
Enclos	ed is a check for	the following amount:			
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclo	Sed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Regisi Divisi P.O. E	LING ADDRESS: tration Section on of Corporations Box 6327 nassee, FL 32314	STREET/COU Registration Se Division of Con Clifton Buildin 2661 Executive Tallahassee, FL	porations g : Center Circle	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	eafood Market &		
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appea lited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Com	pany were filed on	May 5, 2010	and assigned
Florida document number L 10000049352			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	l liability company he	<u>re</u> :	
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Comp	any," the designation "L	LC" or the abbreviatio
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	<u> </u>		200
Enter new mailing address, if applicable:		, I	Sales of the sales
(Mailing address MAY BE A POST OFFICE BOX)		1	
			த்த த
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		our records, <u>enter t</u>	
Name of New Registered Agent:			
Navy Payintand Office Address			
New Registered Office Address:	Er	nter Florida street add	ress
	City	, Florida	Zip Code
	<del>*</del>		•

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, 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	Gale F. Fisher	616 North Bronough St. Tallahassee, Fl 32301	
MGRM_	Sara Jo Fisher	616 North Bronough St. Tallahassee, FL 32301	☐ Add ☑ Remove
MGRM	Gary Nicholas Fisher	616 North Bronough St. Tallahassee, FL 32301	
			Add Remove
	·		Add Remove
			Add Remove
D. If amen	ding any other information, enter ch	ange(s) here: (Attach additional sheets, if necess	cary.)
			5 4 7
Dated		<u> </u>	
	Signature of a mer	nber or authorized representative of a member	
	Τν	Gale F. Fisher	Čiris 💆

Page 2 of 2

Filing Fee: \$25.00