L10000130220

	(Requestor's Name)
	(Address)
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	(Address)
	(City/State/Zip/Phone #)
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PICK-U	WAIT MAIL
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EXAMINER



200204035132

04/26/11--01016--025 **25.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

TO:	Registration S Division of Co			
SUBJI	RCT:	DRINK OF D	ELRAY BEACH LLC	
SCHOL			ted Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all corresp	ondence concerning this matter	to the following:	
P			ETER B. WEINTRAUB Name of Person	
,			Name of Person	
WEINT			RAUB & WEINTRAUB, P.A.	
			Firm/Company	
2700 N F			MILITARY TRAIL SUITE 355	
			Address	<u>. </u>
		BC	CA RATON, FL 33431	
ı			City/State and Zip Code	
		PBW@W	/EINTRAUBLAWFIRM.COM	
		E-mail address: (to be used for future annual report notifica	tion)
For fur	ther information of	concerning this matter, please o	all:	
	PETER	R B. WEINTRAUB	at (561) 98	38-6411
Name of Person			Area Code & Daytime T	elephone Number
				•
Enclos	ed is a check for t	he following amount:		
₹25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 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		ration Section on of Corporations ox 6327	STREET/COURIER Registration Section Division of Corporati Clifton Building 2661 Executive Centor Tallahassee, FL 3230	ons er Circle

B3 4-20-11

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DRINK OF DELRAY BEACH, LLC
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
(Constitution of the confirmation of the confi
The Articles of Organization for this Limited Liability Company were filed on and assigned
Florida document number L10000130220
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
THE DINER, LLC
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 ne registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address: Enter Florida street address
Enter Piorida Street dagress
City Szip Gode
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

Page 1 of 2

B14-20-4

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

MGRN	1 = Mana	iging Member	, i		
Title		<u>Name</u>		Address	Type of Action
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			Carrier Const		Add
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D. If a	mending	any other inforn	nation, enter char	nge(s) here: (Attach additional sheets, if necessary.)	
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Dated_	•	APRIL 18		<u>2011 · </u>	
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		V		er or authorized representative of a member	_ .
			BKA Type	ANDON BELLUSCIO ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00

My 4-30-11