UII 000021354

(Re	equestor's Name)	
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Margaret's Pickles, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for tiling.

Please return all correspondence concerning this matter to the following:

Jason Hamilton Mikes

Name of Person

Hamilton Mikes, P.A.

Firm/Company

711 5th Ave. South #212

Address

Naples, FL 34102

City/State and Zip Code

Jason@Hamiltonmikes.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jason Hamilton Mikes

239 594-7227

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)

Certified Coby
(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**

(Name of the Limited Liability Comp.	any as it now appears on our	records.)		
(A Florida Limited	Liability Company)			
The Articles of Organization for this Limited Liability Compan	y were filed on 2/18/11		and ass	igned
Florida document number LIV 0000 21354		•===		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	bility company here:			
The new name must be distinguishable and end with the words "Lin	nited Liability Company," the	designation "LLC"	or the a	hbreviation
1.L.C."	med Elacinty Company, viic			
Enter new principal offices address, if applicable:	711 5th Ave. South	\$ 3 ws		
Principal office address MUST BE A STREET ADDRESS)	Suite 212	<u></u>	i	
	Naples, FL 34102		 .:	
		1.00 mg	3	
Enter new mailing address, if applicable:	711 5th Ave. South		<u> </u>	٠,
Mailing address MAY BE A POST OFFICE BOX)	Suite 212		:3	. M.L.
	Naples, FL 34102		2	: 5.*
) de la companya de l		
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		ords, <u>enter the n</u>	iame o	of the no
egistered agent and/or the new registered office address ne	<u>ae</u> .			
Name of New Registered Agent: Hamilton I	Mikes, P.A.			
New Registered Office Address: 711 5th Av	ve. South #212			
	Enter Flori	da street address		
Naples		, Florida <u>34102</u>)	
1135.00		, Florida OT 102	-	

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.

d 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

<u> Fitle</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Add
			Remove
			
			Add
			Remove
			Remove
			• •
			Add Add
		Remove	
			
		Add	
			Remove
			Add
			Remove

D. If am	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated	NOVEMBER 22, 2013.
	- The late
	Signature of a member of authorized representative of a member
	Jason Hamilton Mikes
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00