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3. BOSTICK

JUL **2** 2012

## **COVER LETTER**

Division of Corporations
SUBJECT: Heavens Kitchen 5/ 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:
Deborah A. Holton
Heavens Litchen 51 LC
24564 Spring Hill Rd
TIH F(32305)
Debovah. hoton 51@ yahoo. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Debovah A Holton  at 30,528 8520  Area Code & Daytime Telephone Number  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee S30.00 Filing Fee & S60.00 Filing Fee & S60.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  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

ompany as it now appears on our records. (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on Florida document number 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 address 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = M MGRM =	fanager Managing Member	*	
<u>Title</u>	Name Oborah A	Address	Type of Action
<u>UGPM</u>	Holten	2450-4 SpringHill Rd	Add Remove Change
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D. If amer	nding any other information, enter change	e(s) here: (Attach additional sheets, if necessary)	
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Dated	Dobonah D. Y	Jolles	
(	De Deborah H. He	or authorized representative of a member  Or printed name of signee	<del></del>

. Page 2 of 2

Filing Fee: \$25.00