L110000057731

(Re	questor's Name)	
(Add	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
		<u>.</u>
(Bu	siness Entity Nam	e)
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(00)	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer	
Special instructions to	rining Officer.	
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Office Use Only



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JUN 1 7 2013 A. LUNT

FLORIDA DEPARTMENT OF STATE Division of Corporations

June 4, 2013

ELIZABETH SCOTT 8269 SEVEN MILE DRIVE PONTE VEDRA BEACH, FL 32082

SUBJECT: SHOTGUN SUBS III, LLC

Ref. Number: L11000057731

We have received your document for SHOTGUN SUBS III, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filled and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 613A00014010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Shotgun Subs III, 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:

Elizabeth Scott

Name of Person

Shotgun Subs III, LLC

Firm/Company

8269 Seven Mile Drive

Address

Ponte Vedra Beach, FL 32082

City/State and Zip Code

lizs@shotgunsubsllc.com

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

For further information concerning this matter, please call:

Elizabeth Scott

_{./}404\375**-**2787

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)

□\$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 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**

Shotgun Subs III, LLC						
(Name of the Limited	Liability Compa Florida Limited I	ny as it now appears liability Company)	on our records.			
The Articles of Organization for this Limited L Florida document number L11000057731	iability Company	were filed on 05/1	16/2011	and	l assign	ed
This amendment is submitted to amend the foll	owing:					
A. If amending name, enter the new name o	f the limited liab	ility company here	:			
					201	
The new name must be distinguishable and end wi "L.L.C."	th the words "Limi	ted Liability Compar	ny," the designation	i"LISCS or 記述 学习	the abbi	eviation
Enter new principal offices address, if applic	able:	Shotgun Subs	s III, LLC	SSE	<u>=</u>	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		8269 Seven N	Mile Drive	<u> </u>	3	
		Ponte Vedra	Beach, FL 320	82 5	ক্	
				हिली	(C)	
Enter new mailing address, if applicable:		Shotgun Subs	s III, LLC			
(Mailing address MAY BE A POST OFFICE BOX)		8269 Seven N	Mile Drive			
		Ponte Vedra I	Beach, FL 320)82		
B. If amending the registered agent and/ registered agent and/or the new registered of			ur records, <u>ente</u>	<u>r the nan</u>	ne of t	<u>he new</u>
Name of New Registered Agent:	Elizabeth S	cott				
New Registered Office Address:	8269 Seve	n Mile Drive				
		Ente	er Florida street d	address		
	Ponte Vedr	a Beach	, Florida	32082		
		City		Zip (Code	
New Registered Agent's Signature, if changing l	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 addrass, 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

...

4

<u>Title</u>	<u>Name</u>	<u>Address</u> <u>T</u>	ype of Action
Mr.	Johnathan Travis Brown	705 TOWN BOULEVARD, APT. 239	Add
		ATLANTA, GA 30319	Remove
			Add
			Remove
		F.	Add
		AHA SSE	Remove
		E. TLORIE	Add
			Remove
			Add
			Remove
			Add
			Remove

D. If ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Jaled	
	Signature of a member or authorized representative of a member
	Coch ran A. Scott THE Typed or printed name of signee
	1 y ped of printed name of signee

- all - ...

Page 3 of 3

Filing Fee: \$25.00

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