## \_11000070870

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	ry/State/Zip/Phone	<del>;</del> #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
	٠			
(Do	cument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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B. KOHR JAN 1 1 2012 EXAMINER



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## COVER LETTER

10:	Registration S Division of Co			
SUBJI	ECT:	Ameri	can Pi's, LLC	2 Jag
			ited Liability Company	12 JH - 9 H
The en	closed Articles of	f Amendment and fee(s) are su	bmitted for filing.	
Please	return all corresp	ondence concerning this matter	to the following:	
		_	Melanie Dawn Bixby	
	Name of Person			
	American Pi's, LLC			
	Firm/Company			
	305 East International Speedway Suite 3			3
			Address	
		DeLand, Florida 32724		
			City/State and Zip Code	
		E-mail address: (	Melaniebixby	.com
For fur	ther information	concerning this matter, please of	all:	
		nie Dawn Bixby	at ( 386 ) 82	2-4314
	Name o	of Person	Area Code & Daytime To	elephone Number
Enclose	ed is a check for t	he following amount:		
<b> √</b> \$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)
**	MAIL	ING ADDRESS:	STREET/COURIER	ADDRESS.
Registration Section Division of Corporations		ration Section	Registration Section Division of Corporation	
	P.O. B	ox 6327 assee, FL 32314	Clifton Building 2661 Executive Center Tallahassee, FL 32301	· Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



	American Pi's, LLC		Ģ			
(Name of the Limite	d Liability Company as it now appea A Florida Limited Liability Company)	rs on our records.)				
(1	A Fibrida Emitted Englishy Company					
The Articles of Organization for this Limited L	Liability Company were filed on	06/17/2011	and assigned			
Florida document number L1100007	0870					
This amendment is submitted to amend the fol	lowing:					
A. If amending name, enter the new name of	of the limited liability company he	r <u>e</u> :				
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Comp	any," the designation "L	LLC" or the abbreviation			
Enter new principal offices address, if appli	cable:					
(Principal office address MUST BE A STRE	ET ADDRESS)					
·						
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE	(BOX)					
	<del></del>					
B. If amending the registered agent and		our records, <u>enter f</u>	he name of the new			
registered agent and/or the new registered of	office address here:					
	Malaria Davin Diviku					
Name of New Registered Agent:	Melanie Dawn Bixby					
New Registered Office Address:	New Registered Office Address: 305 East International Speedway Suite 3					
-	Enter Florida street address					
	Deland	, Florida	32724			
	City		Zip Code			

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 Squature 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 Type of Action **Title** <u>Address</u> **Name MGRM** Michael D. Snow 129 South Sheridan Avenue Add . Deland FI 32720\_\_\_\_\_ Maria C. Jorge MGRM 1008 Platinum Court Deltona, Fl. 32725 ☑ Add Remove Melanie Dawn Bixby MGRM 31207 Lake Drive Deland, Fl. 32720 ✓ Add Remove Add Remove ∏Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Maria C. Jorge Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00