

L11000077171

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

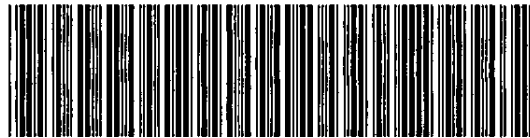
5/9/2013

A

Office Use Only

JUN 14 2013

B. KOHR



800248596318

06/10/13--01009--002 **30.00

FILED
13 JUN 10 AM 11:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
13 JUN 10 AM 11:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 12, 2013

DAVID JONES
STEPHANE'S BRASSERIE, LLC
10500 LITTL PATUXENT PARKWAY, STE. 770
COLUMBIA, MD 21044

SUBJECT: STEPHANE'S BRASSERIE, LLC
Ref. Number: L11000077171

FILED
13 JUN 10 AM 11:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for STEPHANE'S BRASSERIE, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list a TITLE for David Jones. Use MGR for Manager, or MGRM for Managing Member. Or use whatever officer title is appropriate.

But do NOT use MR., MRS., MISS, or MS.

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) 245-6051.

Buck Kohr
Regulatory Specialist II

Letter Number: 313A00014847

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Stephane's Brasserie, LLC
Name of Limited Liability Company

FILED
13 JUN 10 AM 11:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Please return all correspondence concerning this matter to the following:

David Jones
Name of Person
Stephane's Brasserie, LLC
Firm/Company
10500 Little Patuxent Parkway, Ste 770
Address
Columbia MD 21044
City/State and Zip Code
djonesblueridge@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Jones at (410) 884-0220
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

Stephane's Brasserie, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
13 JUN 10 AM 11:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on July 5, 2011

and assigned

Florida document number L11000077171

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)

10500 Little Patuxent Parkway
Suite 770
Columbia, MD 21044

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

10500 Little Patuxent Parkway
Suite 770
Columbia, MD 21044

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

_____, Florida _____

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, Signature of New Registered Agent

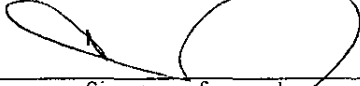
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Mr.	Stephane Lang-Willar	1001 Brickell Bay Drive	<input type="checkbox"/> Add
		Suite 3112	<input checked="" type="checkbox"/> Remove
		Miami, FL 33131	
MGRM Mr.	David Jones	10500 Little Patuxent Pkwy,	<input checked="" type="checkbox"/> Add
		Ste 770	<input type="checkbox"/> Remove
		Columbia, MD 21044	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated June 5, 2013



Signature of a member or authorized representative of a member

David Jones

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00