

L110000093286

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(City/State/Zip/Phone #)

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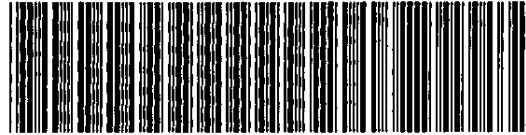
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

AUG 31 2011

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Virginia Avenue Cafe, 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:

Dorothy Stonestreet
Name of Person
Virginia Avenue Cafe, LLC
Firm/Company
5728 St Lucie Blvd
Address
Ft Pierce, Florida 34946
City/State and Zip Code
dirwin4588@att.net
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Dorothy Stonestreet at (772) 332-2403
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

Virginia Avenue Cafe, LLC

Page 1 of 2

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>
MGRM	Stonestreet, Coreen L	5728 St Lucie Blvd Ft Pierce, Florida 34946	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Padgett, Timothy D	5728 St Lucie Blvd Ft Pierce, Florida 34946	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<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 August 24, 2011

D. Stonestreet MGR
 Signature of a member or authorized representative of a member

Dorothy T Stonestreet

Typed or printed name of signee

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