Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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	Division of Co	orp	orations					
	Fax Number	;	(850)61	7-6383				T)
From:								
L L OM.	Account Name	:	FISHER,	TOUSEY,	LEAS	8	BALL	<u> 20</u> (2)
	Account Number							
	Phone	:	(904)35					,

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN OLD CITY BBQ LLC

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Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

Old City BB	Q, LLC		
	Name of Limite	ed Liability Company	
	• • • • • • • • • • • • • • • • • • • •	-	
	Marvin Kloeppel		,
	**************************************	Name of Person	
	Fisher Tousey Leas & Ball,	P.A.	
		Firm/Company	
	501 Riverside Avenue, Suit	e 600	
		Address	
	Jacksonville, Florida 32202		
	tlu@fishertouseu.com	City/State and Zip Code	
	-	be used for future annual report notifi	ication)
information co	oncerning this matter, please ca	II:	
oeppel		904 356-2600 at ()	
Name o	f Person	Area Code Daytime	Telephone Number
a check for th	ne following amount:		
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)
	ision of Corp Old City BB d Articles of A n all correspon n all correspon Name o	Articles of Amendment and fee(s) are submit all correspondence concerning this matter to Marvin Kloeppel Fisher Tousey Leas & Ball, 501 Riverside Avenue, Suit Jacksonville, Florida 32202 tlv@fishertousey.com E-mail address: (to information concerning this matter, please can peppel Name of Person a check for the following amount: Filing Fee \$30.00 Filing Fee &	Name of Limited Liability Company Id Articles of Amendment and fee(s) are submitted for filing. In all correspondence concerning this matter to the following: Marvin Kloeppel Name of Person Fisher Tousey Leas & Ball, P.A. Firm/Company 50! Riverside Avenue, Suite 600 Address Jacksonville, Florida 32202 City/State and Zip Code tlv@fishertousey.com E-mail address: (to be used for future annual report notifinformation concerning this matter, please call: Deppel Name of Person Area Code Daytime a check for the following amount: Filling Fee \$30.00 Filing Fee & Certified Copy

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Bullding 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Old City BBQ, LLC (Name of the Limited Liability Company as It now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on September 8, 2011 Florida document number L11000102705 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 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

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	Todd S. Lineberry	11082 Sentry Oak Court	
		Jacksonville, Florida 32256	■ Remove
			☐ Change
MGR	Todd S. Lineberry	11082 Sentry Oak Court	≅ Add
		Jacksonville, Florida 32256	□ Remove
			☐ Change
			Add
			Remove
			☐ Change
			Add
			Remove
			SST Add
			C) In Change
			Remove
			Change

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Article V				
The Limited Liab	ility Company shall be a manag	er-managed limited liability	company within the	e meaning of the
Florida Revised I	imited Liability Company Act.			
A new Article VI	shall be inserted with the follow	wing and the subsequent Ar	ticles shall be renum	bered:
Article V				
The name and ad	dress of the manager of the Lim	ited Liability Company is:		
Todd S. Lineberr	y			· ·
11082 Sentry Oa	k Court		,	
Jacksonville, Flo	rida 32256			······································
effective date is listed in the control of the date inser	er than the date of filing: , the date must be specific and cannued in this block does not meet the on the Department of State's	he applicable statutory filing	(option ore than 90 days after f g requirements, this	iling.) Pursuant to 6
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effective date is listed in the date inserting and in the date inserting and in the date i	I, the date must be specific and cannued in this block does not meet that on the Department of State. a delayed effective date or the record is filed. May 31 20	he applicable statutory filings records. but not an effective t	ore than 90 days after to g requirements, this irme, at 12:01 a.	iling.) Pursuant to 6 date will not be li

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Filing Fee: \$25.00