L11000108132

•					
> #)					
MAIL					
ne)					
(Document Number)					
of Status					
Special Instructions to Filing Officer:					

B. KOHR

OCT 21 2011

EXAMINER



400213030254

10/19/11--01022--005

∰25.00°

SECRETAR CORPORALISM

COVER LETTER

TO:

Registration Section

Division of C	Corporations		
SUBJECT:	FLAMINGO'S	S BAR & GRILL, LLC	
		ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corres	spondence concerning this matte	r to the following:	87 P. F.
	W	ILHELM BURKHARDT Name of Person	11 OCT 19. PHILE: 57
		Firm/Company	
	574	0 S.E. 30TH PARKWAY	
		Address	
	OKEEC	City/State and Zip Code	
	E-mail address: (to be used for future annual report notifier	ition)
For further information	concerning this matter, please c	all:	
	M. PAINTER, ESQ.		68-7775
Name	of Person	Area Code & Daytime	Telephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 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		STREET/COURIER Registration Section	R ADDRESS:

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	<u>O'S BAH & GRILL,</u>	
(Name of the Limited Liabili (A Florida	ity Company as it now appe a Limited Liability Company	ars on our records.)
(/11/0//4/	и иниса втопну сотрину	
The Articles of Organization for this Limited Liability	Company were filed on	09/21/2011 and ssigned
Florida document number L11000108132		
1 Wildle document manage	·	9 %
69.1		4
This amendment is submitted to amend the following:		Į.
A. If amending name, enter the new name of the lin	nited liability company he	09/21/2011 and ssign (2) (2) (2) (2) (2) (2) (2) (2) (2) (2)
CATEGORY	THREE BAR & GRILL	
The new name must be distinguishable and end with the we"L.L.C."		
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	DRESS)	
	 	
	1-1 1 1162	
Enter new mailing address, if applicable:	M. Carrier Provideres.	Agent. Signature of New Registered Aren
(Mailing address MAY BEA ROST OFFICE BOX)	The state of the s	Signature of New Registered Aren
having illed to mover or flow a with the work of the course	A13	
accer to act and a transfer of the contract of	rope of a who were I have	Section of the state of the Assessment
A STATE OF THE STA	The street after a se	Section 1997 And Institute (INSTITUTE INSTITUTE INSTITUT
Mailing address MAY BEA ROST OFFICE BOX) Define died to home the effect of the first of the fir	stered office address on	our records, enter the name of the ne
registered agent and/or the new registered office add	aress nere:	
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	E	nter Florida street address
 -	City	, Florida Zip Code
	Cuy	zip Code
New Registered Agent's Signature, if changing Register	ed Agent:	
I hereby accept the appointment as registered agent		
the provisions of all statutes relative to the proper a		
accept the obligations of my position as registered of	agent as provided for in C	Chapter 608, F.S. Or, if this document is
heing filed to merely reflect a change in the register	ed office address, I hereb	by confirm that the limited liability
Company has beeningtified in writing of this change	a market was a second of the s	
HER HEW LINDER COTTON P. HOPHISCHEL	If Changing Danistaged Ag	ant Signature of New Registered Agent

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 = M $MGRM =$	anager Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Damara
			
			(*************************************
			["]1)
D. If amen	ding any other information, c	enter change(s) here: (Attach additional sheets, i)	f necessary.)
_			
Dated	OCTOBER 14,	2011	
	Signature	of a member or authorized representative of a member	
		WILHELM BURKHARDT, MGR Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00