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| (Requestor's Name) | | | | |
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| PICK-UP WAIT MAIL | | | | |
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| (Business Entity Name) | | | | |
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| (Document Number) | | | | |
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| Certified Copies Certificates of Status | | | | |
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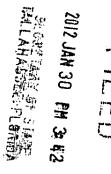
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EXAMINER



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COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: RAGIN RESTAURANTS ON 4TH STEERT 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: |
| Name of Person |
| RAGIN RESTAURANTS ON HTH STREET, LLC. |
| 9100 HM SREET N. Address St. PETE FL 33707 |
| St. PETE FL 33702 City/State and Zip Code Code To the code To th |
| raging Rillon 4TH STREET & Transparkay, RR. Com & E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| John TERHUNE at (727) 235 0303 Name of Person Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) |
| MAILING ADDRESS: Registration Section STREET/COURIER ADDRESS: Registration Section |

Registration Section 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**

| | Restourant | | | | |
|-------------|-------------------------------------|--|-------------------------------|-----------------|--|
| | Name of the Limited Lial (A Flor | bility Company as rida Limited Liabili | it now appears of ty Company) | n our records.) | |

| (Name of the Limited Liability Compa (A Florida Limited I | ny as it now appears on our records.) Liability Company) | |
|--|---|----------------------------|
| The Articles of Organization for this Limited Liability Company Florida document number LIVOOIL4946. | were filed on 10.7.2011 | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liab | oility company here: | |
| The new name must be distinguishable and end with the words "Limi"L.L.C." | ited Liability Company," the designation | "LLC" or the abbreviation |
| Enter new principal offices address, if applicable: | 9100 HTH STREE | T. N. |
| (Principal office address MUST BE A STREET ADDRESS) | ST. PETE, FL 3 | 5762 |
| | | |
| | () () | 8 7 |
| Enter new mailing address, if applicable: | <u> </u> | T I I |
| (Mailing address MAY BE A POST OFFICE BOX) | ر با | 9 9 C |
| | | 7 7 7 7 7 7 7 7 7 7 |
| _ | TERHUNE | r the name of the new |
| New Registered Office Address: 9100 L | HTH STREET N. Enter Florida street a | |
| ST. PE | | 33702 |
| 57, 12 | City Florida | Zip Code |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agr | - | agree to comply with |
| the provisions of all statutes relative to the proper and comp | | |

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 pereby 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:

| <u>:le</u> | <u>Name</u> | Address | Type of Action |
|-------------|--|--|----------------|
| | JOHN B. COX | 13975 FEATHER SOUND DE CLEARWATER, FL 3371 | Add Remove |
| | , y a may may an | | Add Remove |
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| | -E baseliki sara | | Add Remove |
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| | ding any other information, enter chan | ge(s) here: (Attach additional sheets, if necessary. | - Ang |
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Page 2 of 2

Filing Fee: \$25.00