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PICK-UP	☐ WAIT	MAIL		
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10/21/11--01021--014 **25.00



J. BRYAN

UUI 24 2011

EXAMINER

COVER LETTER

SUBJECT:	TIGHTLINES	BAR & GRILL, LLC		
	Name of Lim	ited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sul	omitted for filing.		2 9 7
Please return all corresp	ondence concerning this matter	to the following:		OCT 21 MILLIA
				聯里
		Gil Osterloh		
		Name of Person		
	Bev	erage Law Professionals		ייון.
	1127	75 US Hwy 98 Ste. 6-249)	
		Address		
		Destin, FL 32550		
		City/State and Zip Code		
	E-mail address: (to be used for future annual report n	otification)	
For further information	concerning this matter, please of	·	,	
	, , , , , , , , , , , , , , , , , , , ,			
	Gil Osterloh	at (_850_)	847-9954	
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 Filin	a Faa
[V] \$25.00 Filing Fee	Certificate of Status	Certified Copy (additional copy is enclo	Certificate (sed) Certified (of Status &

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

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

TIGHTLIN	ES BAR & GRILL, L	LC	
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appea Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability	Company were filed on	10/13/2011	and assigned
Florida document numberL11000117957	<u></u> .		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company her	re:	
The new name must be distinguishable and end with the wo	ords "Limited Liability Compa	any," the designation "	LLC" or the abbreviation
"L.L.C."			建筑 運
Enter new principal offices address, if applicable:			SE SI
(Principal office address MUST BE A STREET ADD	RESS)		起って
			野三四
			
Enter new mailing address, if applicable:			3
(Mailing address MAY BE A POST OFFICE BOX)			20
			<u></u>
B. If amending the registered agent and/or regis	stered office address on (our records, enter	the name of the new
registered agent and/or the new registered office ado	dress here:		
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address: Enter Florida sti			dress
		lest eta	
 -	City	, Florida	Zin 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 Mémber being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Type of Action** <u>Title</u> **Address** Name | Jonathan Self MGRM 271 W Petros Rd. ☑ Add Remove Pearl, MS 39208 ☐ Add Remove ☐ Add Remove Remove ___Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) October 19 2011 Dated ___ Signature of a member or authorized representative of a member Jonathan Self Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00