L11000120481

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B. BOSTICK
OCT 2 3 2012
EXAMINER

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: AUGUSTINA'S BISTRO A TASTE OF CHICAGO, 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:

	C	raig D. Blume, Esq.		
		Name of Person		
	C	raig D. Blume, P.A.		
		Firm/Company		
		800 Harbour Dr.		
, •		Address		TANS 12
	Naples, Florida 34103			12 OCT SECRE ALCAH
		City/State and Zip Code		22 ASS
•	naple	slawoffice@gmail.com		SE / N
	E-mail address: (to	be used for future annual report notifica	ntion)	
For further information c	oncerning this matter, please ca	II:		سے دریان
Craig	D. Blume, Esq.	at (239) 1 4	17-4848	I: 23 TATE ORIDA
Name o	f Person	Area Code & Daytime	Telephone Number	
Enclosed is a check for the	ne following amount:			
₹25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate Certified C (additional	of Status &

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AUGUSTINA'S BISTRO A TASTE OF CHICAGO, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization I	for this Limited Liability Company were	filed on10/21/201	11 and assigned	
Florida document number	L11000120481			
This amendment is submitted	to amend the following:			
A. If amending name, enter	the new name of the limited liability co	ompany here:	•	
The new name must be distinguing	ishable and end with the words "Limited Lie	ability Company." the designa	tion "LLC" or the abbreviation	
Enter new principal offices a	address, if applicable:			
(Principal office address MU	ST BE A STREET ADDRESS)		Zig H	
				
			HE CALL	
Enter new mailing address,	if applicable:		22 \$8	
(Mailing address MAY BE A	POST OFFICE BOX)		<u> </u>	
•	·		t-1(1)	
			图 %	
B. If amending the registered agent and/or the a	ered agent and/or registered office a new registered office address here:	ddress on our records, e	nter the rame of the new	
registered agent antibor the	TELISTEREN OFINE AUGUESS HETE.			
Name of New Regist	toposti Actioni			
.vanie or isew regis	icrea zigent.			
New Registered Offi	ice Address:	F. 4 Et 11		
		Enter Florida street address		
		, Florida		
	City	•	Zip 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

MGR = Manager

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:

MGRM = Managing Member Title <u>Name</u> <u>Address</u> **Type of Action** MGR PANTALEO, ANTHONY 3300 DAVIS BOULEVARD ☐ Add NAPLES FL 34103 US ✓ Remove Remove ☐ Add Remove ☐ Add Remove \square Add \square Λ ddRemove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ignature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00