## 12000005310

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B. BOSTICK

OCT - 5 2012

EXAMINER

## **COVER LETTER**

TO: ' Registration Division of C			
SUBJECT:	FRANK AND MAN	NY'S HARBORSIDE LLC	
30 <b>0</b> 32C1.		tited Liability Company	
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corres	spondence concerning this matte	er to the following:	
	F0	TIOS PAPADOPOULOS  Name of Person	
		Name of Felson	
	FRANK AN	D MANNY'S HARBORSIDE LLC	
		Firm/Company	
	2435 7TH STREET SW		
		Address	
	WINTE	ER HAVEN FLORIDA 33881	4
		City/State and Zip Code	72 72
		SDV@ACOCF.COM (to be used for future annual report notification)	007
			- E - 1
For further informatio	n concerning this matter, please	call:	12 OCT -3 האוווי חס ג'ניג'אטלבט דרסאוס
FOTIO	S PAPADOPOULOS	at (_863 ) 207-2440	
Nam	e of Person	Area Code & Daytime Telephone Number	ELTLONDA
			•••
Enclosed is a check for	r the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	te of Status &
Reg Div P.O	ILING ADDRESS: istration Section ision of Corporations . Box 6327 ahassee, 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

FRANK AND MAN	NNY'S HARBORS	IDE, LLC	
(Name of the Limited Liability (A Florida L	Company as it now appear imited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Co	ompany were filed on	1/11/2012	and assigned
Florida document number L1200005310	<u>.</u> .		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company her	<u>re</u> :	
	N/A		
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability Compa	any," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable:		3	
(Principal office address MUST BE A STREET ADDR.	<u>ESS)</u>		
	<del></del>	i i	<u></u>
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			ğ., 5
B. If amending the registered agent and/or registered agent and/or the new registered office addr		our records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:		<del></del>	
	Er	ter Florida street add	tress
-		, Florida	Zip Code
	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

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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	Manuel Papadopoulos	4341 EMERALD PALMS BLVD WINTER HAVEN FLORIDA 33884	✓ Add ☐ Remove
	<del></del>		Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter	r change(s) here: (Attach additional sheets, if necessary.	
			12 00T -3 M
Dated	September 29th	2012	11:09
	Signature of a	Fotios Papadopoulos Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00