

L12000009661

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only.



100220558661

02/13/12--01060--020 **25.00

FILED
2012 FEB 13 PM 1:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
FEB 14 2012
EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FL FRANCHISE HOLDINGS 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:

Tony Mangione

Name of Person

Trinty Commercial Group

Firm/Company

10070 Daniels Interstate Court, Suite 130

Address

Fort Myers, Florida 33913

City/State and Zip Code

tony.mangione@trinitycre.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matt Fredrickson

Name of Person

at (**239**)

588-0471

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 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
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

FILED

2012 FEB 13 PM 1:16

FL FRANCHISE HOLDINGS LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 01/20/2012 and assigned
Florida document number L12000009661.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

FREDRICKSON ENTERPRISES INC

New Registered Office Address:

13680 TROIA DR.

Enter Florida street address

ESTERO

City

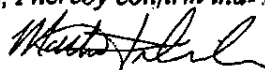
Florida

33928

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

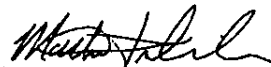
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>FREDRICKSON, MATTHEW</u>	<u>13680 TROIA DR. ESTERO, FL 33928</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>MGR</u>	<u>FREDRICKSON-ENTERPRISES INC.</u>	<u>13680 TROIA DR. ESTERO, FL 33928</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGR</u>	<u>OBERSKI, DANIEL S</u>	<u>10070 DANIELS INTERSTATE CT. SUITE 100</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>MGR</u>	<u>INITUS INC</u>	<u>20575 TORRE DEL LAGO ST. ESTERO, FL 33928</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGR</u>	<u>BERGLUND, DANIEL C</u>	<u>125 HIGH ST. BOSTON, MA 02110</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>MGR</u>	<u>DCB HOLDINGS INC</u>	<u>125 HIGH ST. BOSTON, MA 02110</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

REMOVE CREIGHTON, MARK D 900 SW PINE ISLAND RD. #202

CAPE CORAL, FL 33991

Dated 02/08/2012



Signature of a member or authorized representative of a member

MATT FREDRICKSON

Typed or printed name of signer

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 FEB 13 PM 1:16

FILED