L120003Z080

(Requ	estor's Name)		
(Addre	ess)			
. (Addr	ess)			
(City/s	State/Zip/Phor	ne #)		
PICK-UP	☐ WAIT	MAIL		
(Busin	ness Entity Na	me)		
(Document Number)				
Certified Copies	Certificate	es of Status		
Special Instructions to Filing Officer:				
<u> </u>				

Office Use Only

G. MCLEOD

JUN 21 2012

EXAMINER



600235965746

06/21/12--01008--023 **25.00

12 JUN 21 ANTH: 28
SECRETARY OF STATE
TALL MINASSEE FLORID.

RECEIVED

FILED

** JUN 21 MID: 41

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: Jarrie's Diner 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:						
Jack A. Seckel						
Jack A. Seckel Name of Person Jazzle's Diner						
2188 Candlewyck Ct. Address Tallahassee, FL 32308						
Address						
Tallahassee, FL 32308						
City/state and Zip Code						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Name of Person at (850) 556-1752 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 \$\$Certificate of Status \$\$Certified Copy (additional copy is enclosed) \$\$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

Jarrie's Di	ner ll		
(Name of the Limited Li (A Fl	nbility Company as it now appears or ordinated Liability Company)	our records.)	
The Articles of Organization for this Limited Liabi Florida document numberL12 00003	lity Company were filed on <u>3</u>	and assigned	
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of th	e limited liability company here:		
<u>Carousel</u> Cupcakery	+ Sweet Shop LLC	.a	
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Company,"	"the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	ADDRESS)	<u> </u>	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO		對三 三	
		>	
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·		
• •	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 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>	Address	Type of Action	
			Add Remove	
			Add Remove	
			Add Remove	
<u>.</u>			Add Remove	
<u>.</u>	· .		Add Remove	
·			Add Remove	
D. If amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)		
Dated	Signature of a member	1012. Substitution of a member of a member		
	V	d or printed name of signee		

Page 2 of 2

Filing Fee: \$25.00