

L 12 0000 80660

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

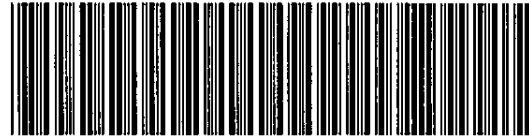
(Business Entity Name)

(Document Number)

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*Reppas & Brannelly, PLLC*  
*100 South Pine Island Road, Suite 202*  
*Plantation, Fl 33324*  
*Tel: 305.822.8422*  
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September 11, 2014

VIA COURIER

Registration Section  
Division of Corporations  
2661 Executive Center Circle  
Clifton Building  
Tallahassee, Florida 32301

**RE: ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATIONS**

To Whom It May Concern:

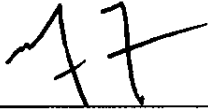
Enclosed please find Articles of Amendment to Articles of Organization for the following Limited Liability Companies:

<u>Entity Name</u>	<u>Entity Number</u>
Truvapes, LLC	L06000018023
Premier Printing Solutions	P99000008561
Konstantine and Partners, LLC	L13000070579
Interorient Marine Services (Usa), Inc.	P00000102333
Ktirio Group LLC	L12000059405
G2 Construction Group, LLC	L13000085874
The American Committee for the Reunification of the Parthenon Sculptures, Inc.	N06000001050
Dogs Up A Tree Photos, INC.	P07000029866
Manglar, L.L.C.	L05000042469
Law Office of Michael J. Reppas, P.A.	P04000031597
Lindon, Inc	P98000028333
Fresh F & B, LLC	L12000080660

Payment in the amount of \$300 is enclosed for filing fees as well as a completed and pre-paid FedEx envelope for the confirmations to be returned.

Many thanks for your assistance.

Sincerely,

A handwritten signature in black ink, appearing to be 'M. J. Reppas II', written over a horizontal line.

Michael J. Reppas II, Esq.

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FRESH F & B, LLC**

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

The Articles of Organization for this Limited Liability Company were filed on 06/18/2012 and assigned  
Florida document number L12000080660.

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:**

MICHAEL J. REPPAS, II

**New Registered Office Address:**

100 S. PINE ISLAND ROAD, SUITE 202

Enter Florida street address

PLANTATION

City

Florida 33324

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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	SPYROS ALEXANDER KARAVIAS	228 SE 1ST STREET	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated SEPTEMBER 11, 2014

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

MICHAEL J. REPPAS, ESQ.

\_\_\_\_\_  
Typed or printed name of signee

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Filing Fee: \$25.00

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