

LIR 000089900

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

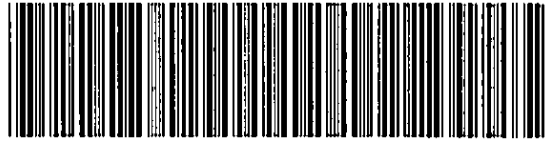
(Business Entity Name)

(Document Number)

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07/27/20--01092--012 **25.00

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2020 JUL 27 AM 8:09
SECRETARY OF STATE
TALLAHASSEE, FL

D. BRUCE
SEP 16 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ISLAND MIX BAR & GRILL 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:

YVES MAIA

Name of Person

TAX LINKS CONSULTANTS LLC

Firm/Company

7751 KINGSPONTE PKWY STE 126

Address

ORLANDO, FL 32819

City/State and Zip Code

YMAIA@TAXLINKSCONSULTANTS.COM

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

For further information concerning this matter, please call:

YVES MAIA

407

270-4846

at ()

Name of Person

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SECRETARY OF
TALLAHASSEE

2020 JUL 27 AM 8:09

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

ISLAND MIX BAR & GRILL 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 07/11/2012 and assigned
Florida document number L12000089900.

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 contain 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:

TAX LINKS CONSULTANTS LLC

New Registered Office Address:

7751 KINGSPONTE PKWY STE 126

Enter Florida street address

ORLANDO

City

Florida

32819

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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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	NATEZA DARSAN	1391 CINDER LANE	<input type="checkbox"/> Add
		KISSIMMEE, FL 34744	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	LIBANESSA NUNEZ	7617 SWILCAN DR APT 2204	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32822	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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
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100

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated JULY 21ST 2020

JULY 21ST

A handwritten signature, possibly 'J. F.', is written over a date stamp that reads 'JULY 21ST'. The signature is in dark ink and is somewhat stylized. The date stamp is in a bold, sans-serif font. The entire stamp is located in the upper right corner of the document.

Signature of a member or authorized representative of a member

1-1 P/1-2

Typed or printed name of signee

Filing Fee: \$25.00