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T. CLINE

AUG 2 7 2012

EXAMINER

COVER LETTER

TO:

TO:	Registration Se Division of Co			
SUBJE	CT:	Fresl	n Resto LLC	
		Name of Limi	ted Liability Company	
The end	closed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
			Joshua A Gropp, Esq	
			Name of Person	
John C Goede PA				
Firm/Company				
8950 Fontana Del Sol Way, Suite 100)
			Address	
			Naples, FL 34109	
			City/State and Zip Code	
		Josh E-mail address: (@FLcommunitylaw.com to be used for future annual report notifica	tion)
For furt	her information o	concerning this matter, please c	•	,
	Josh	ua Gropp, Esq	at (239) 33	31-5100
	Name o	f Person	Area Code & Daytime	Celephone Number
Enclose	ed is a check for the	he 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)
	Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIEI Registration Section Division of Corporati Clifton Building 2661 Executive Center Tallahassee, FL 3230	R ADDRESS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Fresh Resto LLC			
(<u>Name of the Limited Li</u> (A Fl	ability Company as it now appears orida Limited Liability Company)	s on our records.)		
The Articles of Organization for this Limited Liabi			and ass	igned
Florida document numberL1200010039	96			J
	 -			
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of th	e limited liability company here	:		
· · · · · ·				
The new name must be distinguishable and end with the	ne words "Limited Liability Compar	y," the designation "L	LC" or the a	bbreviation
"L.L.C."				
Enter new principal offices address, if applicable	e:			
(Principal office address MUST BE A STREET A	(DDRESS)			
Enter new mailing address, if applicable:				· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BO	<u>X)</u>			
		។ ប៉ុ		7
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on ou	ır records, <u>enter t</u>	ie name o	f the new
registered agent and/or the new registered office	address nere:	() [**	机工	į (provincia)
		·		garena y
Name of New Registered Agent:	**************************************		- 1 1%	
New Registered Office Address:				
	Ente	er Florida street addr	ess	
		, 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 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>	Address	Type of Action
MGR	Tomasina Truglas	123 Alameda Ave Fort Myers, Fl. 33905	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ding any other information, enter chan		FAUG 24
	August 24	2010	
Dated	August 21 , 2	2012	
	Eri	er or authorized representative of a member c Truglas, manager	
	Туре	d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00