# 112000/42867

(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:				
SEP 1 6 2013				
A. LUNI				

Office Use Only



500251527245

09/12/13--01023--016 \*\*25.00

2019 SEP 12 MINI: 18

## **COVER LETTER**

TO: Registration Section
Division of Corporations

<sub>r.</sub> Big Earl's Meats, 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:

James Earl Harvey

Name of Person

Big Earl's Meats

Firm/Company

1028 Cranberry Drive

Address

Orlando, Florida 32811

City/State and Zip Code

Jamhrv1@aol.com

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

For further information concerning this matter, please call:

James Earl Harvey

321<sub>695-3714</sub>

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/COURIER ADDRESS:

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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our re ability Company)	<u>coras.</u> )
The Articles of Organization for this Limited Liability Company w	vere filed on 11-13-2012	and assigned
Florida document number L12000142867		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ity company here:	
		<b>1</b>
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Company," the des	signation "LLC" or the Abbreviation
Enter new principal offices address, if applicable:		SS 70 F
(Principal office address MUST BE A STREET ADDRESS)		The age of
		20년 12년 <b>-</b>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
To the second se		
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:		is, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address, Florida	
	City	Zip Code

If Changing Registered Agent, Signature of New Registered Agent

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

<u> </u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add
			Remove
			Add
			Remove
			<del></del>
· · · · · · · · · · · · · · · · · · ·			Add
			Remove 2
			Remove
	<del></del>		
		<del></del>	Remove
			· · · · · · · · · · · · · · · · · · ·
			Add
			Remove
			Add
			Remove

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

I am requesting the MGRM name be amended to read as follows,

James Earl Harvey. I can not do business as earl harvey.

The bank will not open an account under the present name.

Please amend it to read (James Earl. Harvey). Enclosed is a

\$25.00 USPS money order

Dated SEPTEMBER 5th

2013

Signature of a member or authorized representative of a member

James Earl Harvey

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00