

L12000143104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

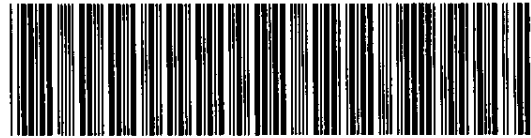
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JAN 31 2013

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FILED  
13 JAN 31 PM 2:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Old Town House of Jerky, 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:

Helen Barakat

Name of Person

Old Town House of Jerky, LLC

Firm/Company

144 Burrell Circle

Address

Kissimmee, FL 34744

City/State and Zip Code

ggbh@live.com

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

5770 W. Irlo Bronson Mem Hwy  
#209

Kissimmee, FL 34744

FILED  
JAN 31 PM 2:00  
TALLAHASSEE, FLORIDA

old Address

Please send everything  
to New  
address

For further information concerning this matter, please call:

Helen Barakat

Name of Person

321-250-3016  
at (216) 832-4009

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

FILED  
13 JAN 31 PM 2:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Old Town House of Jerky, 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 11/13/2012 and assigned  
Florida document number L12000143104

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Barakat Insurance Agency, LLC

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)

144 Burrell Circle

Kissimmee, FL 34744

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

144 Burrell Circle

Kissimmee, FL 34744

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:

New Registered Office Address:

144 Burrell Circle

Enter Florida street address

Kissimmee

City

, Florida 34744

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.

Attilio E. Barakat

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Gaby Barakat	144 Burrell Circle	<input checked="" type="checkbox"/> Add
		Kissimmee, FL 34744	<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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Dated 1/27/2013 , \_\_\_\_\_

Helen E. Barakat

Signature of a member or authorized representative of a member

Helen E. Barakat

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00