

L12000157023

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

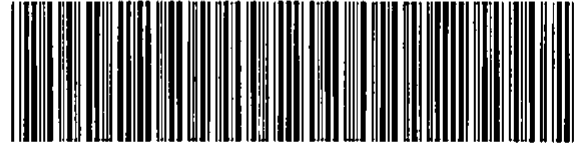
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2019 AUG -5 PM 5:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

AUG 1 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gitchewsum Barbecue 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:

Allen W Pomerleau

Name of Person

Gitchewsum Barbecue LLC

Firm/Company

3284 Elliott St

Address

Venice, FL 34292

City/State and Zip Code

Gitchewsumbbq@gmail.com

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

For further information concerning this matter, please call:

Allen W Pomerleau

Name of Person

at (941)

Area Code

915-2662

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 29, 2019

ALLEN W POMERLEAU
3284 ELLIOTT ST
VENICE, FL 34292

SUBJECT: GITCHEWSUM BARBECUE, LLC
Ref. Number: L12000157023

We have received your document for GITCHEWSUM BARBECUE, LLC and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please have Allen Wayne Pomerleau sign the amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 719A00015481

RECEIVED

2019 AUG -5 AM 11:24

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

Gitchewsum Barbecue LLC

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

2008 AUG 5 P 52

SECRETARY OF STATE
12/17/2012 SEE. FLORIDA

The Articles of Organization for this Limited Liability Company were filed on _____ and assigned
Florida document number L12000157023.

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: Allen Wayne Pomerleau

New Registered Office Address: _____

Enter Florida street address

_____, 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 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>
<u>MGR</u>	<u>Allen Wayne Pomerleau</u>	<u>3284 Elliott St. Venice FL 34292</u>	<input checked="" type="checkbox"/> Add
		<u></u>	<input type="checkbox"/> Remove
		<u></u>	
<u>MGR</u>	<u>Lindsay A King</u>	<u></u>	<input type="checkbox"/> Add
		<u></u>	<input checked="" type="checkbox"/> Remove
		<u></u>	
<u></u>	<u></u>	<u></u>	<input type="checkbox"/> Add
		<u></u>	<input type="checkbox"/> Remove
		<u></u>	
<u></u>	<u></u>	<u></u>	<input type="checkbox"/> Add
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<u></u>	<u></u>	<u></u>	<input type="checkbox"/> Add
		<u></u>	<input type="checkbox"/> Remove
		<u></u>	

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

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 August 1st

2019



Signature of a member or authorized representative of a member

Allen Wayne Pomerleau

Typed or printed name of signee