

L12000159849

(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:

A

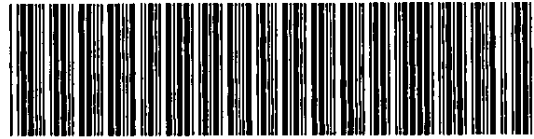
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 JUN 10 PM 4:44

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

PAPA BEAR TWO 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:

B THOMAS CHAPPEL

Name of Person

PAPA BEAR TWO LLC

Firm/Company

1978 TAMiami TRAIL South

Address

VENICE, FL 34293

City/State and Zip Code

tomchappel@comcast.net

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

For further information concerning this matter, please call:

Tom Chappel

Name of Person

at 941 468-8667

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:

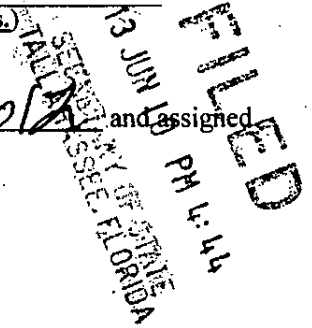
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

PAPA BEAR Two 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 12/24/2012 and assigned
Florida document number L12000159849



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:

AMANDA R CHAPPEL

New Registered Office Address:

1978 TAMiami TRAIL S. #2

Enter Florida street address

VENICE

City

Florida

34293

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.

/s/ AMANDA R. CHAPPEL

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
MGRM = Managing Member

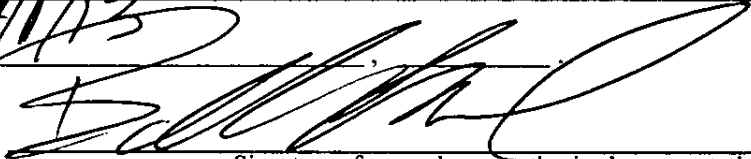
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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[illegible]

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

Dated

01/1/13



Signature of a member or authorized representative of a member

B THOMAS CHAPPEL

Typed or printed name of signee

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Filing Fee: \$25.00