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B. BOSTICK
MAR 3 1 2014
EXAM:

COVER LETTER

TO:

Registration Section
Division of Corporations

MAILING ADDRESS:

Division of Corporations

Tallahassee, FL 32314

Registration Section

P.O. Box 6327

SUBJECT: County Boys Oyskr Bar & Pub, LCC Name of Limited Libbility Company	•
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Belinda Hawalary Name of Person	•
Country Boys Oyster Ban & Pub, LIC	
38 Alma Yata Street	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Belinda Name of Person at (850) 575:1532 Area Code Daytime Telephone Number	ا د د
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \Bigcup \$55.00 Filing Fee & \Bigcup \$60.00 Filing Fee,	

STREET/COURIER ADDRESS:

Registration Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Liability Company as it in appears Florida Limited Liability Company)	Bar & pub	LLC	
ر <u>کا .</u> ng:		and assigned	
ds "Limited Liability Company," the de	esignation "LLC" or the abl	previation "L.L.C."	
	•		
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registered office address on	our records, enter th	he name of the ne	w
		<u> </u>	
		<u> </u>	
Enter Florid City	da street address, Florida	Zip Code	
	lity Company were filed on	Individual Company as it it was appears on our records. Florida Limited Liability Company	Ility Company were filed on

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

MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Dunny J Collins	61 Commerce M.dway FC	Lane MAdd
	•	Midway FC	32343 Remove
			Remove
	·		
			Remove
			Add Remove
			Add
			Remove
			Add
			Remove ::::

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:

D. It amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	 a deficience description of the second
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 March 20 Signature of a member or authorized representative of a member Danny Danny Typed or printed name of signee	 2

Page 3 of 3

Filing Fee: \$25.00