## 13000023744

(Requestor's Name)	_
(Address)	_
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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SECRETARY OF STATE
TALLAHASSEE FLOOR

## **COVER LETTER**

TO:	Registration Se Division of Cor				
SUBJE		ea Room, LLC			
301312		Name of Lin	ited Liability Company		
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please r	return all correspo	ondence concerning this matter	to the following:		
		Alexandra Wayne		•	
			Name of Person		
		Shaffer's Tea Room, LLC			
			Firm/Company		
		14 South Swinton Avenue			
			Address		
		Delray Beach, FL 33444			
			City/State and Zip Code		
		kathleen@goodwater.com			
		E-mail address: (	to be used for future annual report notifi	cation)	
For furt	her information c	oncerning this matter, please ca	all:		
Alexan	dra Wayne		561 276-0055		
	Name o	f Person		Telephone Number	
Enclose	d is a check for th	ne 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

Shaffer's Tea Room, LLC		
( <u>Name of the Limited Liability C</u> (A Florida Li	Company as it now appears on our records. mited Liability Company)	)
The Articles of Organization for this Limited Liability Com Florida document number L13000023744	npany were filed on February 14, 2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain 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 ADDRES	<u></u>	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		17 SEP 28 SEERE JARY ALLAHASSE
B. If amending the registered agent and/or register registered agent and/or the new registered office address	red office address on our records, ss here:	enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	. <u></u>
	, Flor	
	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 Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Thomas E. Worrell	14 S. Swinton Avenue	□ Add
		Delray Beach, FL US 33444	<b></b>
,			■ Change
AMBR	Alexandra C. Wayne	14 S. Swinton Avenue	Add
		Delray Beach, FL US 33444	□ Remove
			Change
<u></u>			🗆 Add
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ffective date, if other than the an effective date is listed, the date must stote: If the date inserted in this blo ocument's effective date on the De	be specific and cannot be prior to dat ock does not meet the applicable s	e of filing or more than 90 d	_ (optional) lays after filing.) Pursu ents, this date will n	iant to 66 ot be lis	05.0207 ( sted as (
e record specifies a delayed The 90th day after the reco		effective time, at 1	2:01 a.m. on th	ne earl	lier of:
The sould day after the rect					
September 22	, 2017				
September 22	2017	representative of a member	-		

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Filing Fee: \$25.00