13000064995

(Requestor's Name)
(Address)
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(Document Number)
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COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT:		Scill At Purp nited Liability Company	De Airro	+ LUC
	Teamic Of 15Hi	med Flatinty Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
·	_	J		
	LON	Benson Name of Person		
		Firm/Company		
	19060	CR 324		20 AUS
	Terre	City/State and Zip Code	sleo	SE COSE
	SUCCSSUE-mail address: (to be used for future annual report not	ilication)	DEFECTIONS OF THE PROPERTY OF
For further information co	oncerning this matter, please ca	all;		<i>∓</i>
Lori	Benson	1 at (60), 323	1005	
Name of	Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for th	e following amount:			į
□ \$25.00 Filing Fee	□ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified Co	of Status &
<u>Mailing Address</u> Registration S		<u>Street Address:</u> Registration Se	ction	
Division of Co		Division of Co		
P.O. Box 632		The Centre of T		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 4, 2020

LORI BENSON 19060 CR 324 TERRELL, TX 75160

SUBJECT: TIKI BAR & GRILL AT PURPLE PARROT LLC

Ref. Number: L13000064995

We have received your document for TIKI BAR & GRILL AT PURPLE PARROT LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

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.

Diane Cushing Senior Section Administrator

Letter Number: 920A00014567

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Partie	(A Florida Limited Liability Compar	iv)	
The Articles of Organization for this Limited L. Florida document number <u>L. 1.3000</u>		and a	ssigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name of the new name must be distinguishable and contain the very name of the new name must be distinguishable and contain the very name of the new name must be distinguishable and contain the very name of the new name	armed balabi	to Congrand	
Enter new principal offices address, if applic	able:		<u> </u>
Principal office address MUST BE A STREE	ET ADDRESS)	<u>\\</u>	<u> </u>
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or regent and/or the new registered office address	egistered office address on ou	r records, enter the name of the ne	1
Name of New Registered Agent:	Registered Agents Inc		<u> </u>
New Registered Office Address:	7901 4th St N STE 30	00 Vorida street address	<u></u>
	St. Petersburg	Florida 33702	1

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

lf amending or removed	Authorized Person(s) authorized to ma	nage, enter the title, name, and address of each p	person being added
MGR = M		•	
<u> </u>	Name	- Address	Type of Action
16x	West Benson	19060 CR 324	
		Terrell TY 15160	□Remove
MBL	Lori Benson	9000 CR 321	□ Change □ Add
•		Terrell N 75160	
	7 0 11		□ Change
	son Uggetts	1 Avel US 39440	\ Add
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ective date, if other than the date of a effective date is listed, the date must be specified. If the date inserted in this block does nument's effective date on the Department	ic and cannot be prior to date of filing or more than 90 days after not meet the applicable statutory filing requirements, the	tional) er filing.) Pursuant to 605.020 his date will not be listed as
	it not an effective time, at 12:01 a.m. on the earlier of: ((b) The 90th day after the
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ed (2-4-7029	<u>ک</u>	
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Kini	CHERRE	
Signature	of a member or authorized representative of a member	
	Cens.	
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