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COVER LETTER

TO:

Registration Section

Division of Corporations

SUBJECT:

VENICE PANINI 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:

MARC J. MILES

Name of Person

LAW OFFICES OF MARC J. MILES P.A.

Firm/Company

742 SHAMROCK BLVD

Address

VENICE, FL 34293

City/State and Zip Code

MMILES@MJMLAWOFFICES.COM

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

For further information concerning this matter, please call:

Marc J. Miles

941,256-0434

Name of Person

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 **ARTICLES OF ORGANIZATION OF**

FILED

2013 NOV 22 AM 8: 50

SECRETARY OF STATE TALLAHASSEE, FLORIDA

VENICE PANINI 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 Lia Florida document number L13000119676	ability Company	were filed on August	23, 2013	_ and assigned
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
The new name must be distinguishable and end with 'L.L.C."	the words "Limi	ted Liability Company,"	the designation "LLC	" or the abbreviation
Enter new principal offices address, if applicable:		339 A WEST VENICE AVE		
(Principal office address MUST BE A STREET ADDRESS)		VENICE, FL 34285		
Enter new mailing address, if applicable:		339 A WEST VENICE AVE		
Mailing address MAY BE A POST OFFICE BOX)		VENICE, FL 34285		
B. If amending the registered agent and/o registered agent and/or the new registered off			ecords, enter the	name of the new
Name of New Registered Agent:	Annamarie DePaolis			
New Registered Office Address:	318 Parksio	de Drive		
-	Enter Florida street address			
	Venice		, Florida <u>3428</u>	35
		City		Zip Code
New Registered Agent's Signature, if changing R	egistered Agent:			

1

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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address 1	ype of Action
MGRM	CESARIO IACOVELLI	245 CENTER ROAD 108	Add
		VENICE, FL 34285	Remove
MGRM	ANNAMARIE DEPAOLIS	318 PARKSIDE DR	- Add
		VENICE, FL 34285	Remove
			Add
			Remove
			Add
			Remove
			 1
			Add Remove
:			
			Add
			Remove

D. If amending	any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	•
	
Dated OCTO	DBER 28 2013
	L'LA-
	Signature of a member or authorized representative of a member
	CESARIO IACOVELLI
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00