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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT

German-American Bakery Club 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:

Name of Person Firm/Company PMB #238 1616-102 W Cape Coral Pkwy Address

JEL 00044

Cape Coral FL 33914

City/State and Zip Code

michael@100prorealty.com

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

For further information concerning this matter, please call:

Michael Binder

___239 **\822876**9

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 TO ARTICLES OF ORGANIZATION OF

GERMAN-AMERICAN BAKERY CLUB 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 Liab	ility Company were filed on 08/29/2013	and signed
Florida document number L13000123347	,	TIEST.
This amendment is submitted to amend the following	ing:	NASSEE OF THE PROPERTY OF THE
A. If amending name, enter the new name of the	ne limited liability company here:	PHIZ: 26
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Company," the design	nation "LLCF or the abbreviation
Enter new principal offices address, if applicable	le:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO B. If amending the registered agent and/or	registered office address on our records,	
registered agent and/or the new registered offic		enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida st	reet address
	, Flo	
	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 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 amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	Michael Binder	5201 Chiquita Blvd S	Add
		Cape Coral FL 33914	Remove
MGR	Michael Binder	5201 Chiquita Blvd S	Add
		Cape Coral FL 33914	Remove
MGRM	Werner Wegener	1321 SW 28th St	Add
		Cape Coral FL 33914	Remove
			_ Add
		ALL AHAS:	2018 DI Remove
		——————————————————————————————————————	Remove
			Add
		<u></u>	Remove

ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
7/10/13
Signature of a member or authorized representative of a member
Michael Binder

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Filing Fee: \$25.00

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