L13000124457

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	→ #)
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

2013 DEC 31 AH IO: 54

JAN - 8 2013

T. HAMPTON

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

BANYAN PICNIC COACH 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:

Eduardo P. Boado

Name of Person

BANYAN PICNIC COACH LLC

Firm/Company

859 Pirates Cove Lane

Address

Fort Pierce FI 34949

City/State and Zip Code

epbepb2@yahoo.com

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

For further information concerning this matter, please call:

Rena Coon

__863 **235-4127**

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



RECEIVED

14 JAN -3 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

December 18, 2013

EDUARDO P BOADO 859 PIRATES COVE LN FT PIERCE, FL 34949

SUBJECT: BANYAN PICNIC COACH LLC

Ref. Number: L13000124457

We have received your document for BANYAN PICNIC COACH LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list name of the LLC on the amendment form.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6051.

Tammy Hampton Regulatory Specialist III

Letter Number: 113A00028757

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Banyon Picnic (Name of the Limited Liability Compar	
(A Florida Limited L The Articles of Organization for this Limited Liability Company Florida document number L1300124457 This amendment is submitted to amend the following:	were filed on September 04, 2013 and assigned ALLAHASSE ANDEC 3
A. If amending name, enter the new name of the limited liab	ility company here:
Smokey's BBQ and Catering, LLC	The state of the s
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Company," the designation "LEC" or the abbreviation
Enter new principal offices address, if applicable:	Eduardp P Boado
(Principal office address MUST BE A STREET ADDRESS)	859 Pirates Cove Lane
	Fort Pierce FL 34949
Enter new mailing address, if applicable:	Eduardp P Boado
(Mailing address MAY BE A POST OFFICE BOX)	859 Pirates Cove Lane
	Fort Pierce FL 34949
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent: New Registered Office Address:	
	, Florida
	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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Man MGRM = M	ager anaging Member		
<u>Title</u>	Name	<u>Address</u>	Type of Action
			Add
			Remove
			
			Add
			Remove
			-
			_
		TAL	Remove
		LARA SA	
		en c	Add
		1.02 1.02 1.02 1.02 1.02	Add
			Add
			Remove
			Add
			Remove

). If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated	· · · · · · · · · · · · · · · · · · ·
	Signature of a member or authorized representative of a member
	EDVARDO P Boado
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
2013 DEC 31 AM ID: 54
SECRETURY OF STATE