

LB000152289

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

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12/17

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FILED

2018 DEC 17 AM 12:35

CLERK OF STATE
TALLAHASSEE, FL

DEC 18

S. PRATHER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 7, 2018

CRAIG M. PETERS
APATOFF PETERS EBERSOHL
9600 BLACKWELL ROAD., 2ND FL
ROCKVILLE, MD 20850

SUBJECT: PBE VENTURES, LLC
Ref. Number: L13000152289

We have received your document for PBE VENTURES, LLC and your check(s) totaling \$25.00. 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 appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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) 245-6900.

Stacy Prather
Regulatory Specialist III

Letter Number: 018A00023032

DEC 17 PM 2:47

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PBE Ventures, 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:

Craig Peters

Name of Person

Apatoff Peters Ebersohl, LLC

Firm/Company

9600 Blackwell Road

Address

Rockville, Maryland 20850

City/State and Zip Code

cpeters@apatoffpeters.com

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

For further information concerning this matter, please call:

Craig Peters

301 315-5825
at ()

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

2013 OCT 17 PM 2:46

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

PBE Ventures, 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 Liability Company were filed on 10/29/2013 and assumed
Florida document number L13000152289.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Eden Hospitality Ventures, LLC

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 ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street 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 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

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2018 DEC 19 AM 12:35
CLERK OF CIRCUIT COURT
TALLAHASSEE, FL

If appending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
	Lauren Eden	7131 Arlington Road, Apt 510	<input checked="" type="checkbox"/> Add
		Bethesda, Maryland 20814	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
	Marc Eden	8007 Cobble Creek Circle	<input type="checkbox"/> Add
		Potomac, Maryland 20854	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Crady RTERS

Typed or printed name of signee

FILED