

613000165371

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

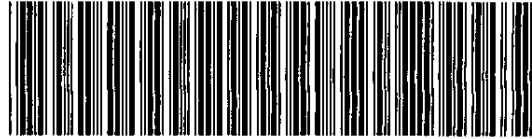
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF STATE
TALLAHASSEE, FLORIDA

S Warren

JUL 19 2016



12301 Lake Underhill Road, Suite 213
Orlando, Florida 32828

Tel: 407.512.4394
Fax: 407.982.7250

July 14, 2016

Division of Corporations
Registration Section
Post Office Box 6327
Tallahassee, FL 32314

Re: Schofield Restaurant Group LLC

To Whom It May Concern:

Enclosed please find the original Articles of Amendment and the corresponding fee of \$25.00 for Schofield Restaurant Group LLC. Kindly process the Amendment and contact my office at the above listed telephone number if any questions or concerns arise.

Thank you for your assistance.

Sincerely,

Jennifer A. Englert

JAE: cft

Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Schofield Restaurant Group, 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:

Jennifer A. Englert

Name of Person

The Orlando Law Group, PL

Firm/Company

12301 Lake Underhill Road, Suite 213

Address

Orlando, Florida 32828

City/State and Zip Code

jschmitt@theorlandolawgroup.com

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

For further information concerning this matter, please call:

Jennifer A. Englert

407 512-4394
at () _____
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

Schofield Restaurant Group, 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 November 25, 2013 and assigned
Florida document number L13000165371.

This amendment is submitted to amend the following:

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

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)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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: Jennifer A. Englert

New Registered Office Address: 12301 Lake Underhill Road, Suite 213

Enter Florida street address

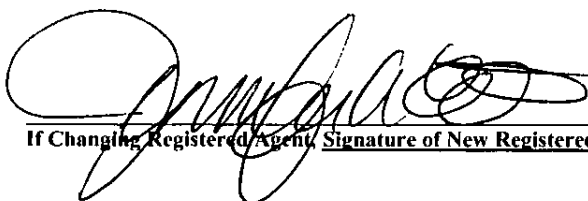
Orlando, Florida 32828

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

If amending 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>
Manager	Kathy Hastings	1811 North Orange Avenue	<input checked="" type="checkbox"/> Add
		Orlando, Florida 32804	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Manager	Jason Schofield	1811 North Orange Avenue	<input type="checkbox"/> Add
		Orlando, FL 32804	<input checked="" 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"/> Remove
			<input type="checkbox"/> Change

SECRETARY OF STATE
TAMPA, FLORIDA
JUN 11 2011
11:08 PM

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper has a slightly textured appearance and some minor discoloration or shadows, suggesting it's a physical scan. There is no handwriting or other markings on the paper.

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.


If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

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

Dated

July 13 2016

July 13, 2016


Signature of a member or authorized representative of a member

Jennifer A. Englert

Jennifer A. Englert

Typed or printed name of signee

FILED
2017 JUN 28 P 2:01
CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
THE STATE OF FLORIDA
DADE COUNTY