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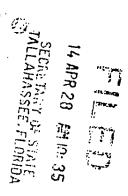
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7	PICK-UP WAIT MAIL			
,	(Business Entity Name)			
	(Document Number)			
	Certified Copies Certificates of Status			
,	Special Instructions to Filing Officer:			
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Smokin' Pink BBQ & Catering, 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:

Laurie R. Stephen	·
Name of Person	
Firm/Company	
23 NE 138th Street	
Address	•
Okeechobee, FL 34972	
City/State and Zip Code	
10 (10 to 10	:5
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Laurie R. Stephen

,863

634-3462

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

Smokin' Pink BB0					
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears	on our records.)			
(A Clothda Dimite	Cabinity Company)				
The Articles of Organization for this Limited Liability Compan	y were filed on	April 9, 20	14	and assign	ied
Florida document number L14000058583		٠,			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited lia	bility company her	<u>·e</u> :			
The new name must be distinguishable and end with the words "Limited Li	ability Company," the d	esignation "LLC"	or the abbre	viation "L.L.	C.''
Enter new principal offices address, if applicable:	116 SW 4th	Avenue	Ø _Ø <u>Þ</u> c	<u> </u>	
(Principal office address MUST BE A STREET ADDRESS)	Okeechobee	, FL 34974	_ <u>₹</u>		ş.;
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	141	· <u>·</u>	(/)	<u> </u>	
Enter you walling address if annihable.		•	in Œ	亚 。	74
Enter new mailing address, if applicable:			<u></u>	-3 :	
(Mailing address MAY BE A POST OFFICE BOX)	. · <u>. · · · · · · · · · · · · · · · · ·</u>	<u> </u>	OR O	<u>ယူ ``</u>	
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	t tr				
B. If amending the registered agent and/or registered		our records,	enter the	name of	the nev
registered agent and/or the new registered office address he	ere:				
Name of New Registered Agent:					
New Registered Office Address:					
New Registered Office Address.	Enter Flori	da street address			
	; · , · , · , · , · , · , · , · , · , ·	F 14 (
	City	, Flori		Zip Code	
		بالمنج بساو			

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

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records: MGR = Manager AMBR = Authorized Member Type of Action <u>Title</u> Name □ Add ☐ Remove

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Effective (date, if other than the date o	of filings	(optional)	
The effective	date must be specific, cannot be pr	ior to date of receipt or filed date and cannot be mor	re than 90 days after	
the date this	document is filed by the Florida Do		<u>.</u>	
Dated	April 10	<u>2014</u>	· .	
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		ure of a member or authorized representative of a n		
	Signati	Laurie R. Stephen	nember	
		Typed or printed name of signee		
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