

L14000110276

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
OCT -1 2014

TOMMY D. PERMENTER, JR.

*ALSO ADMITTED IN SC



BELLWETHER PROFESSIONAL PARK
2201 S.E. 30TH AVENUE, SUITE 202
OCALA, FLORIDA 34471

TELEPHONE
(352) 622-1811

FACSIMILE
(352) 622-1866

EMAIL
TOMMY@PERMENTERLAW

September 23, 2014

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

Re: Lake City BBQ, LLC
Document No.: L14000110276

Ladies and Gentlemen:

Enclosed please find Articles of Amendment and Articles of Organization for Lake City BBQ, LLC.

It is requested that the Articles of Amendment for Lake City BBQ, LLC be filed first, as it is amending its articles to change its name to Not LC BBQ, LLC.

After the Articles of Amendment for the name change have been filed, please file the enclosed Articles of Organization to utilize the name Lake City BBQ, LLC.

I have also enclosed the respective filing fees of \$25.00 for the filing of the Articles of Amendment and of \$155.00 for the filing of the Articles of Organization.

If you have any questions concerning this letter or the enclosures, please feel free to contact this office.

Sincerely,

THE PERMENTER LAW FIRM, P.A.



Tommy D. Permenter, Jr.

TDP/am
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lake City BBQ, 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:

Tommy D. Permenter, Jr., Esq.

Name of Person

The Permenter Law Firm, P.A.

Firm/Company

2201 S.E. 30th Avenue, Suite 202

Address

Ocala, Florida 34471

City/State and Zip Code

tommy@permenterlaw.com

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

For further information concerning this matter, please call:

Tommy D. Permenter, Jr., Esq.

at (352) 622-1811

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

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rds.)

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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

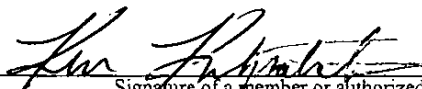
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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated September 23, 2014



Signature of a member or authorized representative of a member

Kenneth B. Kirkpatrick, Manager

Typed or printed name of signee

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Filing Fee: \$25.00

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