L14000133399

(Requestor's Name)			
(Address)			
(Address)			
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Attified Copies Certificates of Status			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



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COVER LETTER

SUBJECT:		OUL KITCHEN LLC		
SUBJECT;			ted Liability Company	
The enclosed	d Anicles of A	mendment and fee(s) are subn	nitted for filing.	
Please return	all correspon	dence concerning this matter to	o the following:	
		JOSCLYN ALLEN		
			Name of Person	
			Firm/Company	
		8175 AMBACH WAY		
			Address	
		HYPOLUXO, FL 33462		
		LBOONE4854@AOL.COM	City/State and Zip Code	
		E-mail address: (to	be used for future annual report notif	lication)
For further in	nformation co	ncerning this matter, please cal	II:	
	Name of	Person	at () Area Code Daytime	e Telephone Number
Enclosed is a	check for the	following amount:		
■ \$25.00 F	îling 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

·TO:

'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

HEART & SOUL KITCHEN LLC	
(Name of the Limited Liability Company as it now appears on our re- (A Florida Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability Company were filed on	and assigned
Florida document number L14000133399	
This amendment is submitted to amend the following:	: 50
A. If amending name, enter the new name of the limited liability company here:	B 2
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)	02
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	
3. If amending the registered agent and/or registered office address on our reconguistered agent and/or the new registered office address here: Name of New Registered Agent:	ords, enter the name of the
New Registered Office Address: Enter Florida street aa	ldress
	, Florida 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>	Address	Type of Action
AR	ANTHONY M BOONE	8055 AMBACH WAY	☐ Add
		HYPOLUXO, FL 33462	
			Remove
			☐ Change
MGRM	VINCENT T BOONE	507 SW 15TH AVENUE	
		DELRAY BEACH, FL 33444	Add
			■ Remove
			Change
MGRM	LENA D COTTON	1225 CANYON WAY	E'Add
		WELLINGTON, FL 33414	22 22
			■ Remove
MGRM	JAMES M HATCHER	1225 CANYON WAY	
		WELLINGTON, FL 33414	■ Remove
		-	Remove
			□ Change
			Add
			Remove
			Change
			□ Remove
			□ Change

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Filing Fee: \$25.00