## 114000101954

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## **COVER LETTER**

	Registration Sec Division of Corp			<b>*</b> :
CHDIRC	TEE TIME	ES, LLC		
SUBJEC	ı: <u></u>	Name of Lim	ited Liability Company	
The enclo	sed Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please reti	urn all correspon	dence concerning this matter	to the following:	
		THELMA WHITE		
			Name of Person	
			Firm/Company	<del> </del>
	735 NE 5TH AVE., #1			
			Address	
	FORT LAUDERDALE, FL 33304			
			City/State and Zip Code	
		teewhite26@yahoo.c		
			to be used for future annual report notifi	ication)
For furthe	r information co	ncerning this matter, please ca	all:	
THELM	IA WHITE		754 244-4798	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed i	is a check for the	following amount:		
□ \$25.00	9 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



TEE TIMES, 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 \_\_\_10/28/14 and assigned Florida document number \_L14000167954 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: RITA'S RITAS, LLC The new name must be distinguishable and end with 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 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

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 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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
		-	□ Add
		<del></del>	□ Remove
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Effective date, if other than the date of filing:  (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  MARCH 3  , 2015  Signature of a member or authorized representative of a member  THELMA WHITE, MGR		
The effective date, if other than the date of filing:  (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  MARCH 3  , 2015  Signature of a member or authorized representative of a member		
The effective date, if other than the date of filing:  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  MARCH 3  , 2015  Signature of a member or authorized representative of a member		
(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  MARCH 3  , 2015  Signature of a member or authorized representative of a member		
Signature of a member or authorized representative of a member	(The effective date must be specific, cannot be prior to date	e of receipt or filed date and cannot be more than 90 days after
	Dated MARCH 3	2015
	Qulma	300
		ember or authorized representative of a member

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Filing Fee: \$25.00