

L15000007099

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000272593650

05/08/15--01003--015 **60.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 MAY - 8 P 1:52

FILED

5 15 15
TSCHREIDER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Island Way Sorbet, 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:

Catherine Marais

Name of Person

Island Way Sorbet, LLC

Firm/Company

2618 Success Drive

Address

Odessa, FL 33556

City/State and Zip Code

cathy@islandwaysorbet.com

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

For further information concerning this matter, please call:

Catherine Marais

727

777-2107

at ()

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

CM

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Island Way Sorbet, 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 December 30, 2014 and assigned
Florida document number L15000007099.

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)

FILED
2015 MAY -8 P 1:52
SECRETARY 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: Kim Fesler

New Registered Office Address: 2618 Success Drive

Enter Florida street address

Odessa, Florida 33556

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

asm

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>
MGR	Catherine Marais	2618 Success Drive, Odessa, FL	☒ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

FILED
2015 MAY -8 P 1:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Wm

FILED
2015 MAY - 8 PM 1:52
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED
2015 MAY - 8 PM 1:52
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.

Dated 27th April, 2015.

Braun's

Signature of a member or authorized representative of a member

Catherine Marais

C. MARAIS

Typed or printed name of signee

Wm