LISCOCYTW

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	≥ #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



500275841635

08/10/15--01005--015 **25.00

15 AUS 10 PH 2:59

AUG 11 2015 S. YOUNG

COVER LETTER

то:	Registration Sec Division of Corp				
CHD IEZ		RESTAURANT AND LOUN	GE OF FORT MYERS LLC		
SUBJEC		Name of Lim	ited Liability Company		
The encl	osed Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspon	dence concerning this matter	to the following:		
		DAILYN MADRIGAL			
			Name of Person		-
			Firm/Company		_
		1920 BOYCOUT DR			一般 高 四
			Address		
		FORT MYERS, FL 33907			10 mm
			City/State and Zip Code		2:55
		E-mail address: (to be used for future annual report noti	fication)	្លាំ ហ
For furth	ner information co	ncerning this matter, please c	all:		
DAILY	N MADRIGAL		305 394-7105		
	Name of	Person	Area Code Daytim	e Telephone Numbe	r
Enclosed	d is a check for the	e following amount:			
\$25.	00 Filing Fec	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of Status &

MAILING ADDRESS:

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

SUGGARS RESTAURANT AND LOUNGE OF FOR		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny <u>as it now appears on our records.</u> Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on01/16/2015	and assigned
Florida document number L15000009940		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" of	
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	1920 BOYCOUT DR	前員可
	FORT MYERS, FL 33907	5 -
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	1920 BOYCOUT DR	्री ध्र
	FORT MYERS, FL 33907	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	ida Zip Code
	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

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>	Type of Action
MGR	ALINA NAPOLES	1920 BOYCOUT DR	■ Add
		FORT MYERS, FL 33907	☐ Remove
			☐ Change
MGR	DAILYN MADRIGAL	1920 BOYCOUT DR	Add
		FORT MYERS, FL 33097	□ Remove
			☐ Change
	-	····	Add
			□ Remove. □ Change
			Addı E □ Addı
			☐ Remove
			☐ Change
			Add
			□ Remove
			Change
			Add
			Remove
			Change

	· · · · · · · · · · · · · · · · · · ·			
				
			-	
_				

fective	e date, if other than the d	ate of filing:	tate of filing or more than 90 days	optional) after filing.) Pursuantto 605.020
	the date inserted in this blocates effective date on the Dep	be specific and cannot be prior to dock does not meet the applicable	e statutory filing requirements	• • •
Jeumen	a seriective date on the Dep	artificity of State 8 records.		語音工
e reco	rd specifies a delayed	effective date, but not a	n effective time, at 12:	01 a.m. on the earlier o
The 9	Oth day after the reco	rd is filed.		· , 글 🖯
	JULY, 21th	2015		Ş 2
ated		·		ं ज
		W		
	S	fignature of a member or authorize	ed representative of a member	
		1		

Page 3 of 3

Filing Fee: \$25.00