

4150000241149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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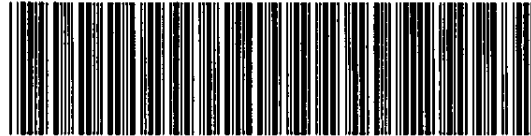
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 29 2016
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SUSIES SPREAD 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:

Guy Davenport
Name of Person

IKE'S SEAFOOD LLC
Firm/Company

8823 Tamiami Trail East
Address

Naples FL 34113
City/State and Zip Code

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

For further information concerning this matter, please call:

WIN WOOSTER
Name of Person

at (828)
Area Code

777-7760
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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUSIE'S SPREAD, 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 FEB. 9 2015 and assigned Florida document number L15000024149.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

IKE'S SEAFOOD LLC

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)

8823 TAMiami TRAIL EAST
Naples FL 34113

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8823 TAMiami TRAIL EAST
Naples, FL 34113

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:

UNITED STATES Corporation Agents, Inc.

New Registered Office Address:

13302 WINDING OAK CT A

Enter Florida street address

TAMPA

City

Florida

33612

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>	<u>Type of Action</u>
<u>MGR</u>	<u>HANZEL RAMOS</u>	<u>3887 Mannix Dr</u>	☐ Add
		<u>Naples FL 34114</u>	☒ Remove
			☐ Change
<u>AMBR</u>	<u>WIN WOOSTER</u>	<u>8823 Tamiami Tr. East</u>	☒ Add
		<u>Naples FL 34113</u>	☐ Remove
			☐ Change
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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 1-25-16

Win Wooster

Signature of a member or authorized representative of a member

WIN WOOSTER

Typed or printed name of signee