

4500039729

Florida Department of State

Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : FASTKIT CORP
Account Number : I20100000009
Phone : (305) 599-0839
Fax Number : (305) 592-9591

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
JERK MACHINE @ RIVER BEND FORT LAUDERDALE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

REC'D
15 MAR 25 4:10:00
BUREAU OF CORPORATIONS
INFORMATION SERVICESFILED
15 MAR 25 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 26 2015

S. YOUNG

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

JERK MACHINE @ RIVER BEND FORT LAUDERDALE, 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 03/04/2015 and assigned
Florida document number LL5090039729

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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:

HCT CERTIFIED PUBLIC ACCOUNTANTS

New Registered Office Address:

3816 HOLLYWOOD BOULEVARD, SUITE 203

Enter Florida street address

HOLLYWOOD

City

Florida

33021

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.

[Signature]
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 = Manager

AMBR = Authorized Member

Title	Name	Address	Type of Action
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MGR	PORTABELLA FLP	Post Office Box 14035	<input checked="" type="checkbox"/> Add
		Fort Lauderdale, Florida 33302	<input type="checkbox"/> Remove

MGR	VETA E FOOTE	8801 GATEHOUSE ROAD	<input type="checkbox"/> Add
		UNIT 8	<input type="checkbox"/> Remove
		PLANTATION, FL 33324	

15 MAR 25 AM 11:45
CREATED BY
IN LAMAR, H
Add
Remove
Add
Remove

FILED

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (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 23, 2015



Signature of a member or authorized representative of a member

TREMAYNE L. DAVIS

Typed or printed name of signer

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