

L15000084621

(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



000286291860

000286291860  
08/01/17--01010--001 \*\*25.00

17 AUG - 1 AM 10:04  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

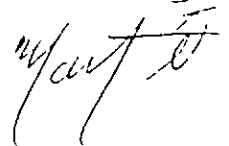
M. MILLIGAN

AUG 02 2017

Matt Person <sup>JD</sup> Person Law  
565 NE 66<sup>th</sup> Street, Ste. 1, Miami FL 33138  
[mtyperson@gmail.com](mailto:mtyperson@gmail.com)  
(305) 640-5754 fax (888) 402-6190

Attention Michelle Milligan

Minoan LLC per our  
conversation 7/28/2017 here  
is the check for the filing  
fee. I decided I didn't  
need a certified copy. Thanks  
for your call & holding this.

Sincerely,  


Matt Person

# REGISTRATION SECTION

TO: Registration Section  
Division of Corporations

MEMORANDUM

SUBJECT: Name of Person or Entity

The enclosed Articles of Amendment and Certificates are submitted for filing.  
Please return all correspondence concerning this matter to the following:

NAME OF PERSON

Name of Person

PERSON TYPE

Person Type

565 NE 56TH STREET, SUITE 1

Address

MIAMI FL 33138

City/State and Zip Code

matthew.person@gmail.com

Email address (if used for future annual report notification)

For further information concerning this matter, please call:

NAME OF PERSON

Area Code

640-5754

at

Daytime Telephone Number

Name of Person

Area Code

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$15.00 Filing Fee &  
Certified Copy  
(Additional copy is required)

☐ \$10.00 Filing Fee &  
Certificate of Status &  
Certified Copy  
(Additional copy is required)

MAILING ADDRESS:  
Registration Section  
Division of Corporations  
P.O. Box 637  
Tallahassee, FL 32304

STREET COURTESY ADDRESS:  
Registration Section  
Division of Corporations  
Tallahassee Building  
200 North Olive Street, Suite 1200  
Tallahassee, FL 32304

NO \$

2017 JUL 24 AM 11:52

MAILING ADDRESS

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
17 AUG -1 AM 10:04

MINOAN 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 5/13/2015 and assigned  
Florida document number L15000084621.

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)**

2917 Biscayne Blvd.

Miami FL 33137

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

2917 Biscayne Blvd.

Miami FL 33137

**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

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>	<u>Type of Action</u>
AMBR	ASUMAN ERGUN	1052 BRICKELL AVE.	<input type="checkbox"/> Add
		1010 N.W. 11th St	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

PER OWNERS OF MINOAN LLC: MINOAN LLC IS SELLING ALL ASSETS AND OPERATIONS  
OF EAT GREEK AT 1060 BRICKELL LOCATON TO ATLAS FOODS LLC IN EXCHANGE FOR  
PAYMENT OF \$22,889 FROM ATLAS FOODS LLC TO ALSO FOR RELIEF FROM JUDGMENT AND  
PAYMENT OF \$11,000 FROM ATLAS FOODS LLC TO PREMIER PRODUCT FOR RELIEF FROM  
JUDGMENT. THIS BUYOUT INCLUDE MINOAN LLC ASSIGNING LEASE TO 1060 BRICKELL AND  
ALL DEPOSITS TO ATLAS FOODS LLC. ATLSAS FOODS LLC TO PAY ASSIGNMENT FEE TO L.L.  
OF \$12,000 AND ASSUME ALL RENTAL PAYMENTS AS OF JULY 2017. PURSUANT TO THIS AGREE-  
MENT MINOAN LLC RETAINS NOT INTEREST IN PROFITS OR ASSETS OF EAT GREEK AT  
1060 BRICKELL.

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated

July 17 17

Signature of a member or authorized representative of a member

Typed or printed name of signer

VASSILIOS DIMITAKIS