# L15000146916

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## COVER LETTER • • • • •

TO: Registration Section Division of Corporations	
SUBJECT: Chef Kens Smokehouse BBQ NPR 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:	
Kenneth Stephens Name of Person	
Firm/Company	
5018 Jance Jane	
Holiday FC 34690 City/State and Zip Code	
Holiday FL 34690  City/State and Zip Code  KBStephens 33e Yahar. cm  E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Ken Stephens at 561 201-4626  Name of Person at 661 Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigcup \$	

#### **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

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Mailing address MAY BE A POST OFFICE BOX)	
Enter new mailing address, if applicable:	
(Principal office address MUST BE A STREET ADI	DRESS)
Enter new principal offices address, if applicable:	
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
A. If amending name, enter the new name of the li	mited liability company here:
This amendment is submitted to amend the following:	
The Articles of Organization for this Limited Liability Florida document number	Company were filed on 8.27.2015 and assigned
	Q.77 7N5
(11.101)	Illty Company as it now appears on our records.) ida Limited Liability Company)

#### 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>	Name	Address	Type of Action		
MGR	Kenneth Stephens	5018 Janice lane Holiday FL 34690	Z Add		
		Holiday FL 34690	□ Remove		
			Change		
MGR	Christiane Stephens	5018 Janua lane	_ E Add		
	·	5018 Janua lane Holiday, FC 34690	Remove		
			Change		
<del></del>			□ Add		
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☐ Change

, II ;	amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	<u> </u>
(If a	fective date, if other than the date of filing:
do	cument's effective date on the Department of State's records.
	record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: The 90th day after the record is filed.
Da	ated $\frac{9-8}{100}$ , $\frac{2015}{100}$ .
	Signature of a member or authorized representative of a member
	Sannar Clay for N  Typedfor printed name of signee

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Filing Fee: \$25.00