

L16000026343

(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:

wrong form

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06/09/16--01032--001 **25.00

2016 JUN 28 P 3:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

S Warren

JUN 29 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 10, 2016

KEN STEPHENS
30 NORTH RING AVENUE, SUITE 200
TARPON SPRINGS, FL 34689

SUBJECT: CHEF KENS BBQ CATERING LLC
Ref. Number: L16000026343

We have received your document for CHEF KENS BBQ CATERING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FOREIGN LLC, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren
Regulatory Specialist II

Letter Number: 616A00012350

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Chef Ken's BBQ Catering LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KEN STEPHENS
Name of Person

CHEF KEN'S BBQ CATERING
Firm/Company

30 NORTH RING AVE SUITE 200
Address

TARPON SPRINGS FL 34689
City/State and Zip Code

KBstephens33@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kenneth Stephens at (561) 201-4626
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

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

Chef KENS BBQ catering 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 2-8-2016 and assigned Florida document number L16000026343.

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)

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:

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>
<u>MGR</u>	<u>Kenneth Stephens</u>	<u>30 North Ring Ave</u>	<input checked="" type="checkbox"/> Add
		<u>#200 Tarpon Springs FL</u>	<input type="checkbox"/> Remove
		<u>34689</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>Christiane Stephens</u>	<u>30 North Ring Ave</u>	<input checked="" type="checkbox"/> Add
		<u>#200 Tarpon Springs FL</u>	<input type="checkbox"/> Remove
		<u>34689</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>Sandra Clayton</u>	<u>5018 Janice lane</u>	<input type="checkbox"/> Add
		<u>Holiday FL 34690</u>	<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

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

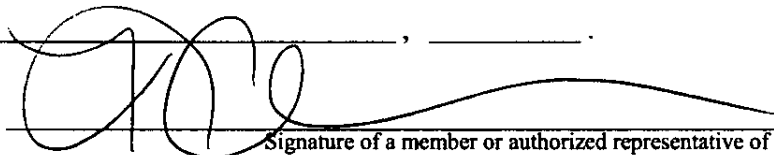
E. Effective date, if other than the date of filing: 5-25-16 (optional)

(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 _____, _____



Signature of a member or authorized representative of a member

KENNETH STEPHENS

Typed or printed name of signee

2016 MAY 28 P 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED