

L16000152383

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

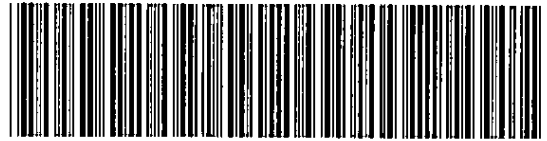
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/29/19--01028--016 **25.00

FILED
2019 JUN 23 PM 3:08

Amend

MAY - 9 2019

BRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Romes, 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:

Jeron Mathis
Name of Person

Romes, LLC
Firm/Company

122 E Main St #273
Address

Lakeland, FL 33801
City/State and Zip Code

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

For further information concerning this matter, please call:

Jeron Mathis at (813) 272-8380
Name of Person Area Code 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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Romes, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2019 APR 29 PM 3:08
STATE OF FLORIDA
CLERK OF THE CIRCUIT COURT

The Articles of Organization for this Limited Liability Company were filed on 8/15/2016 and assigned
Florida document number L1600052383.

This amendment is submitted to amend the following:

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

N/A

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)

122 E Main St #273
Lakeland, FL 33801

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

122 E Main St #273
Lakeland, FL 33801

B. If amending the registered agent and/or registered office address on our records, enter the name of the n.
registered agent and/or the new registered office address here:

Name of New Registered Agent:

N/A

New Registered Office Address:

122 E Main St #273

Enter Florida street address

Lakeland

City

Florida

33801

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.

N/A

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	Jeron Mathis	122 E Main St	<input type="checkbox"/> Add
		# 273	<input type="checkbox"/> Remove
		lake land, FL 33801	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

N/A

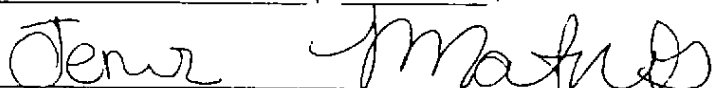
E. Effective date, if other than the date of filing: _____ (optional)

(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)(c),

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

Jeron Mathis

Typed or printed name of signee