

L16000156331

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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16 AUG 29 AM 11:30
TALLAHASSEE, FLORIDA

AUG 30 2016

Y SULKER

*Law Offices of
Steven Michael LaBret, P.A.*

**LL.M. IN TAXATION
ALSO ADMITTED IN LOUISIANA
AND MICHIGAN BARS**

**150 PASADENA PLACE
ORLANDO, FLORIDA 32803
Telephone (407) 422-5819
Telecopier (321) 236-6618**

August 24, 2016

Div. of Corporation
Registration Section
Post Office Box 6327
Tallahassee, FL 32314

RE: **Seller: JML Equities, Inc.
Buyer: Sanford Avenue Tavern, LLC d/b/a The Tavern
Lender: JML Equities, Inc.
LL #: 69-00045 Series 4COP
County: Seminole**

**Our Client: JML Equities, Inc.
Our File No: 370-L-00374**


Dear Sir/Madam:

Enclosed find a check for **\$25.00** to cover the costs of filing the Articles of Amendment to Articles of Organization of **Sanford Avenue Tavern, LLC**.

Please send the recorded document(s) to the undersigned in the enclosed self-addressed stamped envelope.

Thank you for your anticipated cooperation.

Sincerely,



STEVEN MICHAEL LaBRET

SML/ao
Encls.

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

SANFORD AVENUE TAVERN, 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 August 22, 2016 and assigned
Florida document number L16000156331.

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>
AMBR.	Deana M. Ackey	11101 Stonebrook Drive	<input checked="" type="checkbox"/> Add
		Sanford, FL 32773	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR.	Deana M. Ackey	11101 Stonebrook Drive	<input type="checkbox"/> Add
		Sanford, FL 32773	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR.	Joseph Fetichick, III	P.O. Box 1286	<input type="checkbox"/> Add
		Sanford, FL 32772	<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
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

16 APR 29 21:11:30
 WILLAMETTE COUNTY, OREGON

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

16 AUG 29 AM 11:00
U.S. DEPT. OF STATE
CLASS. SEC. FLORIDA

16 AUG 29 AM 11:30
CLASSIE, FLORIDA

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 August 24, 2016

X Diana Ackey
Signature of a member of

Signature of a member or authorized representative of a member

Deana Ackey

Typed or printed name of signee