116000193406

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COVER LETTER

Div	ision of Corp	porations		
UBJECT:	LeeVista BI	BQ, LLC		
		Name of Lim	ited Liability Company	
he enclosed	l Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
		ndence concerning this matter		
icase return	an correspon	idence concerning this matter	to the following.	
			Name of Person	
			Firm/Company	
			·	
			Address	
		<u> </u>	City/State and Zip Code	
		E mail addrace: (to be used for future annual report not	(Continu)
or further in	nformation co	oncerning this matter, please ca	·	meation)
		7,		
	Name of	Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a	schook for th	e following amount:		
		_		— • • • • • • • • • • • • • • • • • • •
■ \$25.00 F	iling 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:

TO:

Registration Section

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

Leevista BBQ, LLC		
(<u>Name of the Limited Liability Com</u> (A Florida Limite	ipany as it now appears on our recor ed Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Compa	ny were filed on 10/19/16	and assigned
Torida document number L16000193406		
This amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited li	ability company here:	
.ee Vista BBQ, LLC		
he new name must be distinguishable and contain the words "Limited Lis	ability Company," the designation "LL	C" or the abbreviation \L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
Principal office address MUST BE A STREET ADDRESS)		0 5
nter new mailing address, if applicable:		を で で で こ
Mailing address MAY BE A POST OFFICE BOX)		7 -
<u></u>		
	·	
3. If amending the registered agent and/or registered	office address on our record	ds, enter the name of the :
egistered agent and/or the new registered office address h		as, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	c's.s
	. F	lorida
	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 = M $AMBR = M$	lanager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
			☐ Remove
			☐ Change
***************************************			Add
			□ Remove
			☐ Change
			D Add
			□ Remove
			Change
			□ Remove
			Change
			Remove
			Change
			Remove
			□ Change

	To clarify our request, we are requesting a space in between Lee and Vista in our name:	
	Changing name from: Leevista BBQ, LLC	
	Changing name to: Lee Vista BBQ, LLC	
		··· · · · · · · · · · · · · · · · · ·
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		7. F
E. Eff (If a	fective date, if other than the date of filing: (option of the date of filing or more than 90 days after the date of filing or more the date of filing or	tional) er filing.) Pursuant to 60
No	ote: If the date inserted in this block does not meet the applicable statutory filing requirements, the 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. The 90th day after the record is filed.	a.m. on the earl
Da	nted December 14 2017	
··	-V V J - T	

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Typed or printed name of signee

Filing Fee: \$25.00