## L17000000783

(Demontodo Norro)
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Eiling Officer:
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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

## **COVER LETTER**

	gistration Se vision of Cor			
CHĐ IỆCT.		GRILL DELAND LLC		
SUBJECT:		Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub-		
	·	JAMES JURSS	·	
			Name of Person	
		ARTISAN GRILL		
			Firm/Company	· <del></del>
		215 SOUTH WOODLANI	D BLVD	
			Address	- Section of the sect
		DELAND, FL 32720		cation)
			City/State and Zip Code	
		brad.jurss@gmail.com		न ति
		E-mail address: (	to be used for future annual report notifi	cation)
For further i	nformation co	oncerning this matter, please ca	all:	cation)
BRADLEY	JURSS		386 748-6414 at ( )	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	ne 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)
	MAIL	ING ADDRESS:	STREET/COURIE	ER ADDRESS:

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

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARTISAN GRILL DELAND LLC	
( <u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appears on our records.) la Limited Liability Company)
The Articles of Organization for this Limited Liability (	Company were filed on 12/30/2016 and assigned
Florida document number L17000000783	<del></del> ·
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	nited liability company here:
The new name must be distinguishable and contain the words "Lir	mited 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 ADD.	RESS)
Enter new mailing address, if applicable:	THE STATE OF THE S
(Mailing address MAY BE A POST OFFICE BOX)	
	PA FLO
B. If amending the registered agent and/or regi registered agent and/or the new registered office add	istered office address on our records, enter the name of the new dress here:
	·
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
<del></del>	City Zin 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>	Address	Type of Action	
MGR	BRADLEY JURSS	215 S WOODLAND BLVD		
		DELAND, FL 32720	□ Remove	
			Change	
			Remove	
			☐ Change	
			Add 75 SEC	
			Remove H. T. A. S.	
			□ Change	
			Add 5	
			Remove	
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ective date, if other than t	he date of filing:		(option:	al)
ective date, if other than the effective date is listed, the date inserted in this	nust be specific and cannot be	prior to date of filing or	more than 90 days after filing requirements, this day	ing.) Pursuant to 605.020 ate will not be listed as
ument's effective date on the	Department of State's rec	ords.	,	
	and offertion date. how	t ant an officiative	time at 13:01 a n	n on the earlier o
record specifies a delay he 90th day after the r	ecord is filed.	i nocan enecuve	ume, at 12.01 a.n	i, on the earlier o
ADDU 27	2017			
ed APRIL 27	, 2017	·		
	X			
	Signature of a member of	authorized representati	ve of a member	

Page 3 of 3

Filing Fee: \$25.00