## Ln00099419

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
. (Do	cument Number)	•
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
·		

Office Use Only



500296946485

03/27/17--01044--027 \*\*25.00



D. SCOTT MAR 2 9 2017

## COVER LETTER

Div	ision of Corp	orations	1	
SUBJECT:	Bully Gators	Wing Shack LLC		
		Name of Lim	nited Liability Company	
The enclosed	Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please return	all correspond	dence concerning this matter	to the following:	
		Charles W Pardee Jr.		
			Name of Person	
		Bully Gators Wing Shack	LLC	
			Firm/Company	
		1431 NE 25th Ave		
			Address	
		Ocala, FL 34470		
			City/State and Zip Code	
		cpardee@newsbull.com	to be used for future annual report notification	vian)
				non)
For further in	nformation cor	ncerning this matter, please c	all:	
Charles Parc	lee		352 875-8051	-10 <b>-1</b>
	Name of I	Person		Selephone Number Selephone Number Selephone Number Continue Selephone Seleph
Enclosed is a	check for the	following amount:		
<b>■</b> \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	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

**Bully Gators Wing Shack 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  $\frac{03/15/2017}{1}$ \_ and assigned Florida document number L17000059419 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 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

If Changing Registered Agent, Signature of New Registered Agent

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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager

**AMBR** = **Authorized Member** 

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Charles W Pardee Jr.	1431 NE 25th Ave	■ Add
		Ocala, FL 34470	☐ Remove
		-	□ Change
MGR	Deborah M Pardee	1431 NE 25th Ave	
		Ocala, FL 34470	■ Remove
			Change
			Add
			□ Remove
			☐ Change
			□ Add  Remoye  Change
			HIGH TO THE TOTAL THE TOTAL TO THE TOTAL TOT
			Remove
			Add
			□ Remove
			□ Change

•				
-				
		•		
<del></del>				
ctive date, if other than the d	ate of filing:		(optiona	an
effective date is listed, the date must be	be specific and cannot be pr	ior to date of filing or n	nore than 90 days after fili	ng.) Pursuant to 605.0
: If the date inserted in this bloc	k does not meet the app	licable statutory filin		
iment's effective date on the Dep	artment of State's record	ds.		
				## <b>=</b>
ecord specifies a delayed ne 90th day after the reco	effective date, but r	not an effective f	time, at 12:01 a.m	n. on the earlier
ie 90th day after the reco	'd is filed.			<b>三三</b>
				TOP N
March 24th	2017			THO T
d	,	·		OF STATE E. FLORID
				1 1
				97

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00