

L17000186665

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FL

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Y. SCOTT

MAR 26 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lyneht miros 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:

Name of Person
Snappy Tax
Firm/Company

209 NE 36th Ave
Address

Ocala, FL 34470
City/State and Zip Code

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

SECRETARY OF STATE
DIVISION OF CORPORATIONS
FLORIDA

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For further information concerning this matter, please call:

Benjamin Burke at (352) 533-4250
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
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Lynch & miros 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 8/31/2017 and assigned
Florida document number L17000186665

This amendment is submitted to amend the following:

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

Central Florida Food & Beverage LLC
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)

125 NE 1st Ave
Suite 4
Ocala, FL 34470

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

125 NE 1st Ave
Suite 4
Ocala, FL 34470

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:

Snappy Tax
209 NE 36th Ave
Ocala, Florida 34470
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.

Benjamin Burke
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>
MGR	Frances Lynch	4944 SE 44 th Cir	<input type="checkbox"/> Add
		Ocala, FL 34480	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Norman Scalf	5989 N Orchis Ter	<input checked="" type="checkbox"/> Add
		Beverly Hills, FL 34465	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Kimberly Miro	1825 SE 85 th St Rd	<input type="checkbox"/> Add
		Ocala, FL 34480	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Kimberly Miro	1825 SE 85 th St Rd	<input type="checkbox"/> Add
		Ocala FL 34480	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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JUDICIAL CIRCUIT IN AND FOR
FLORIDA
COUNTY OF ALACHUA

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TALLAHASSEE, FL

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2022 MAR 18 PM 3:11
SECRETARY OF STATE
TALLAHASSEE, FL

(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)

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.

Kimberly Miras

Signature of a member or authorized representative of a member

Kimberly Miroso
Typed or printed name

Typed or printed name of signee