117000242365

(Re	equestor's Name)	
(Ac	ddress)	
(Ad	ddress)	
(C	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Br	usiness Entity Nar	ne)
(D	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



600317412206

08/31/18--01018--009 *+80.00

18 AUG 31 AM 9: [1

N COOPER SEP 07 2018

COVER LETTER

TO: Registration Se Division of Cor			
	/ Runnings -	Domailcan Reited Liability Company	estaurant LLC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Carolyn B Cool Rang		in Restaurent LLC
	1210 U.	Nova Rd Address	
	Codrugging E-mail address:	Beach 7 3' City/State and Zip Code S daytons amount report notified by used for future annual report notified by the second seco	JII) fication)
For further information of	oncerning this matter, please ca	all:	
Carolyn (Name o	Source f Person	at (376) 216 l Area Code Daytimo	2732 e Telephone Number
Enclosed is a check for the	he 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)
	ING APPRESS		PD A DDDCCC

MAILING ADDRESS:

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

(Name of the Limited Liability C	Company as it now appears on our records.) imited Liability Company)	-
The Articles of Organization for this Limited Liability Com Florida document number <u>L 1700024236</u>	·	assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d 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 ADDRES	(22	<u></u>
		SICS
	ري د	(¬
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	3	三 景.
		. 2
B. If amending the registered agent and/or register registered agent and/or the new registered office address		e of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	<u></u>
	City Zip Coo	le .
New Registered Agent's Signature, if changing Registered A	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
mar	Sharon Cele	1210 Minoua Rol Daytone	🗆 Add
		1210 Minoua Rol Daytone Beach £1 32117	Remove
			Change
			🗆 Add
			□ Remove
			Change
			🗆 Add
			Remove
			Change
			Add
			Remove
			_口 Сһалде
			_□ Add
			Remove
			Change
			□ Add
			_□ Remove
			☐ Change

	<u>-</u>	_
•		
		_
		_
		_
		-
		_
		-
	18	SIAIC
	AUG PUG	- D
	<u> </u>	- 뜻
	<u> </u>	-) 1993(
	ي	- ²
	=	
		_
		_
		_
2 04 0212		
fective date, if other than the date of filing: 8-28-2013 (option effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after	ional) r filing.) Pursuant to 60	05.020
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this cument's effective date on the Department of State's records.	is date will not be lis	sted a
•		
record specifies a delayed effective date, but not an effective time, at 12:01	a.m. on the earl	lier d
The 90th day after the record is filed.		
Signature of a member or authorized representative of a member CCOLYN BOWN Typed or printed name of signee		
C_{α} , C_{α} , C_{α}		
Signature of a member or authorized representative of a member		
L arolyn 1840W().		

Page 3 of 3

Filing Fee: \$25.00