

L18000195911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

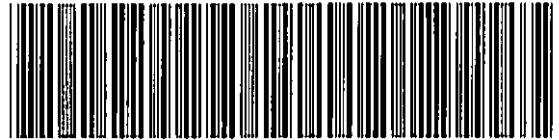
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

K. SALY

SEP 17 2018

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 386305 4337964

AUTHORIZATION

Spence

COST LIMIT : \$ 25.00

ORDER DATE : September 13, 2018

ORDER TIME : 9:19 AM

ORDER NO. : 386305-005

CUSTOMER NO: 4337964

DOMESTIC AMENDMENT FILING

NAME: MARSHALL RESTAURANT FLORIDA
LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MARSHALL FLORIDA RESTAURANT 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:

MARTIN H. BLANK, JR.

Name of Person

LAW OFFICES OF MARTIN H. BLANK, JR.

Firm/Company

11355 WEST OLYMPIC BOULEVARD, SUITE 300

Address

LOS ANGELES, CA 90064

City/State and Zip Code

MARTY@MBLANK.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARTIN H. BLANK, JR.

at (310) 736-1617

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/COURIER ADDRESS:

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

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TALLAHASSEE, FLORIDA
rds.)

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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>
AMBR	ROBERTA K. MARSHALL, TRU:	21452 SAN BERNARDO	<input type="checkbox"/> Add
		MISSION VIEJO, CA 92692	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	SHELDON MARSHALL, TRUSTI	21452 SAN BERNARDO	<input type="checkbox"/> Add
		MISSION VIEJO, CA 92692	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated SEPTEMBER 13, 2018

Roberta K Marshall

Signature of a member or authorized representative of a member

ROBERTA K. MARSHALL, TRUSTEE

Typed or printed name of signer