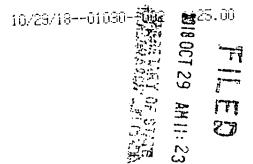
48000239020

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





200320113042



Y SULKER NOV 1 6 2018

COVER LETTER

SUBJECT:				
			ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		NAN PANTON		
			Name of Person	
	Division of Corporations VENICE AVE BISTRO, LLC Name of Limited Liability Company e enclosed Articles of Amendment and fee(s) are submitted for filing. ase return all correspondence concerning this matter to the following: NAN PANTON			
Firm/Company				
	Firm/Company 341 W. VENICE AVENUE Address			
			Address	
		VENICE, FL 34285		
		NAN@K-RLAW.COM	City/State and Zip Code	
		E-mail address; (to be used for future annual report notifi	cation)
For further in	nformation co	oncerning this matter, please ca	all:	
NAN PANT	ON			
Name of Person			Area Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:		
₽ \$25.00 F	iling Fee		Certified Copy	Certificate of Status & Certified Copy

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

VENICE AVE BISTRO, LLC		
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on OCT 9, 2018	and assigned
Florida document number L18000239020	<u></u> .	<u>-</u>
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
he new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or the	re abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registered agent and/or the new registered office add Name of New Registered Agent:	stered office address on our records, enderess here:	2018 OCT 20 of the new contraction and 11: 2
		-
New Registered Office Address:	Enter Florida sweet address	
	Florida	Zıp 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. Thereby 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
AMBR	CECILIA A. TEJADA		
			■ Remove
			☐ Change
AMBR	CECILIA ARIMANY TEJADA	125B MIAMI AVE WEST	■ Add
		VENICE, FL 34285	☐ Remove
			Change
			→ □ Add
			50 E
			Change On Adg 23
			□ Remove
			Change
			
			□ Remove
			Change
			
			☐ Remove
			☐ Change

		<u> </u>
		
		318
		18 DCT
	\$	
	No.	_
	76 93	
	in the second se	23
Effective date, if other than the date of filing:	(optional)	
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of Note: If the date inserted in this block does not meet the applicable state.)	I filing or more than 90 days after filing.) Pursua utory filing requirements, this date will no	int to 605,0205
document's effective date on the Department of State's records.	S requirement and same with the	v oc nate as
the record enecifies a delayed effective data has a second		
the record specifies a delayed effective date, but not an eff) The 90th day after the record is filed.	rective time, at 12:01 a.m. on the	e earlier o
10/25/2018		
Dated 10/25/2018		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00