

Office Use Only



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## **COVER LETTER**

ROGER'S SUBJECT:	CHICAGO HOTDOGS LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Roger Muller		
	ROGER'S CHICAGO HO	Name of Person TDOGS LLC	
	5383 EMERSON RD	Firm/Company	
	BROOKSVILLE, FL 3460	Address	
	roger@chgodog.com	City/State and Zip Code	
For further information of	E-mail address: ( concerning this matter, please ca	to be used for future annual report notif all:	fication)
Roger Muller	of Person	at () 277-2709 Area Code Daytime	e Telephone Number
· · · · · · · · · · · · · · · · · · ·		, dea code 194yana	· receptante . Author
Enclosed is a check for t	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)

MAILING ADDRESS:

Registration Section Division of Corporations

TO:

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

ROGER'S CHICAGO HOTDOGS LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)	
The Articles of Organization for this Limited Liability Company we Florida document number L19000008144.	ere filed on 01/07/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabilit	ty company here:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the al	obreviation "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)	TAL.	2019 DCT -
	· · · · · · · · · · · · · · · · · · ·	1 E D
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:	ee address on our records, <u>enter</u>	the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Florida	

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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>	Type of Action
mgr	Roger Muller	5383 EMERSON RD BROOKSVILLE, FL 34601-	☐ Add
			□ Remove
			☐ Change
			□ Add
		· .	☐ Remove
			Change
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E. Effective date, if other th	
Note: If the date inserted in	the must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) this block does not meet the applicable statutory filing requirements, this date will not be listed as the the Department of State's records.
If the record specifies a d (b) The 90th day after th	layed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e record is filed.
Dated 10/02	2019
100	Signature of a member or authorized representative of a member
	<i>)</i>
Roger Muller	

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Typed or printed name of signee

Filing Fee: \$25.00