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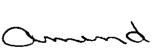


Office Use Only



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## **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
	ndence concerning this matter			
	Jim Stockman			
		Name of Person		
		Firm/Company		
	2579 SW 87th Drive			
	Gainesville, FL 32608	Address		
	lin (Wiking Communication and	City/State and Zip Code		
	Jim@VikingCompanies.org E-mail address: (	to be used for future annual report not	ification)	
For further information c	oncerning this matter, please c	all:		
Jim Stockman		352 333-9333 at ()		
Name of Person		Area Code Daytin	ne Telephone Number	
Enclosed is a check for th	ne 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)	
<u>Mailing Addres</u> Registration S		<u>Street Address:</u> Registration Sc	ection	
Division of Corporations		Division of Co	rporations	
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Spurrier's Gridiron Grille Celebration Pointe, 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  $\frac{4/16/2019}{1}$ and assigned. Florida document number L19000104531 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registe agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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 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 adorer removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Freddie Wehbe	Wehbe Marketing	□Add
		1900 SW 34th Street, Suite 206	□Remove
		Gainesville, FL 32608	□Change
			□Add
			□Remove
			□Change
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Dated April 21	رم. ام	2020			
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Typed or printed name of signee