49000118406

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SECRETARY OF STATE THE SECRETARY OF STATE TO SECRETARIONS

Omend name change

COVER LETTER

TO: Registration Sec Division of Corp					
SUBJECT:	Name of Limit	DEER LLC led Liability Company			
	Amendment and fee(s) are subnadence concerning this matter to				
	YUNIOR 1	Name of Person			
	60y PROPE	Firm/Company			
		15450 Address			1511 1411 1411 ())
	YUNIOR76	City/State and Zip Code WYPHOO. COM o be used for future annual report notifi	cation)	19 ¥106 29 E	400 36 46(St.) 7.886 347 (St.) 7.886 347 (St.)
	oncerning this matter, please ca			29 PM12: 10	OF STATE
YUNIUR R Name of	Person	at (813) 758. Area Code Daytime	3704 Telephone Number	0	SHOL
Enclosed is a check for th	e 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 Statt Certified Copy (additional copy is enco		

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

STEAK Y	BEER	LLC	 -		
(Name of the Limited Liabi (A Florid	lity Company as it now a da Limited Liability Compa	ppears on our rec any)	ords.)		
The Articles of Organization for this Limited Liability Florida document number L1900018406	Company were filed o	n <u>05/01/</u>	2019 ;	and assigr	ned
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lin	nited liability compar	ny here:			
STEAK AND DEER The new name must be distinguishable and contain the words "Li	LLC.				
The new name must be distinguishable and contain the words "Li	mited Liability Company."	the designation "l	LLC" or the abbrevia	tion "L.L.C	
Enter new principal offices address, if applicable:		····			
(Principal office address MUST BE A STREET ADD	ORESS)				
				<u> 19</u>	
				AUG	22
Enter new mailing address, if applicable:				_ _ 2	76 <u>≥</u> - 100 -
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>	- 골 -	
					<u>ਉੱਤੇ</u> ਹੋੜ
				0 ,	
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	istered office addres ldress here:	ss on our reco	ords, <u>enter the</u>	name of	J)
Teginered ugon manor me					
Name of New Registered Agent:					
New Registered Office Address:					
-	Ente	er Fiorido street ao	ldress		
			, Florida		
	City		Zi	ip 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. 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>	Name CARLOS IVAN	Address	Type of Action
MGR	JURADO ORTIZ		D Add
			□ Remove
		P.U. DOX 15450 TAMPA, FL 33684	🗹 Change
			O Add
			C Remove
			🗆 Change
			O Add
			Remove
			Change
			□ Add
			Remove
			Change
			□ Add
			Remove
			Change
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			🗆 Remove
			☐ Change

, 11 ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
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Note:	tive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	<u>AUGUST 26</u> . 2019
	Signature of a member or authorized representative of a member
	GOY PROPERTIES LLC / YUNIOR FIVERO. Typed or printed name of signee

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Filing Fee: \$25.00