

L19000122439

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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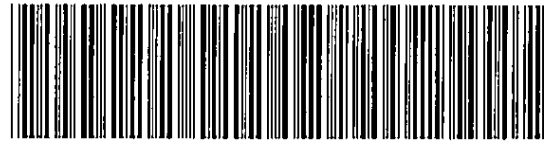
(Business Entity Name)

(Document Number)

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SEP 23 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BNF RICHARDS FOODPORIUM 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:

ADAM D. BIRCH, ESQ.

Name of Person

OLDER LUNDY & ALVAREZ

Firm/Company

1000 WEST CASS STREET

Address

TAMPA, FL 33606

City/State and Zip Code

ABIRCH@OLALAW.COM

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

For further information concerning this matter, please call:

ADAM D. BIRCH, ESQ.

at (813) 254-8998

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BNF RICHARDS FOODPORIUM 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 MAY 6, 2019 and assigned
Florida document number L19000122439.

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 "L.L.C."

Enter new principal offices address, if applicable:

8125 25TH COURT EAST

(Principal office address MUST BE A STREET ADDRESS)

SARASOTA, FL 34243

Enter new mailing address, if applicable:

8125 25TH COURT EAST

(Mailing address MAY BE A POST OFFICE BOX)

SARASOTA, FL 34243

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

JONATHAN DRAKE, JR.

New Registered Office Address:

8125 25TH COURT EAST

Enter Florida street address

SARASOTA


City

Florida 34243

Zip 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	KAREN A. SARDINA	10275 WINDHORST ROAD	<input type="checkbox"/> Add
		TAMPA, FL 33619	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	SCOTT A. JACKSON	10275 WINDHORST ROAD	<input type="checkbox"/> Add
		TAMPA, FL 33619	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	GARY LANOE	10275 WINDHORST ROAD	<input type="checkbox"/> Add
		TAMPA, FL 33619	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	CHADWICK WILTON	8125 25TH COURT EAST	<input checked="" type="checkbox"/> Add
		SARASOTA, FL 34243	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR		C/O WHIPPOORWILL HOLDINGS	<input type="checkbox"/> Add
		50 CARROLL STREET, UNIT 220	<input checked="" type="checkbox"/> Remove
		TORONTO, ONTARIO M4M 3G3 CA	<input checked="" 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.)*

19 SEP 27 AM 9 02

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be at least 15 days before the date of filing.)

(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 requirements of 605.0207 (3)(b), the date must be specific and cannot be prior to date of filing or more than 90 days after filing.

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.

(b) The 90th day after the record is filed.

Dated Sep. 18, 2019

Signature of a member or authorized representative of a member

Chadwick Wilton
Typed or printed name of signee

Typed or printed name of signee