# L19000258940

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#### **COVER LETTER**

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SUBJECT:	Monroy Re				
SUBJECT.	-	Name of L	mited Liability Company		O C. L. P. C. L.
The enclose	d Articles of	Amendment and fee(s) are so	abmitted for filing.		<b>f</b> s .
Please return	n all correspo	ondence concerning this matter	er to the following:	, <u>, , , , , , , , , , , , , , , , , , </u>	
		Michael Monroy		• '	· • • • • • • • • • • • • • • • • • • •
			Name of Person		
		Monroy Restaurants LLO			1
		· · · · · · · · · · · · · · · · · · ·	Firm/Company	<del></del>	
		1681 Wells ROAD			į L
		-			
		Orange Park/ FL 32073			
		•	City/State and Zip Code		}
		berzerker155@gmail.com	to be used for future annual report notific:		
For further i	nformation c	oncerning this matter, please	·	tion)	
Michael Mo	onroy		904 6086978 at ( )		
	Name o	f Person		elephone Number	<del>_</del>
Enclosed is	a check for th	ne following amount:	^/		
□ <b>\$</b> 25.00 I	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	50.00 Filin Certificate of Certified Co (additional co)	of Status &

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Monrov Restaurants 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  $\frac{10/15/2019}{10/15/2019}$ and assigned Florida document number \_\_\_\_\_19000258940 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 registered 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 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

\_\_\_\_, Florida \_\_\_\_

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
AMBR	Michael Monroy		□Add
			□Remove
		2806 Adele Road 32216	<b>≘</b> Change
	AT	<del></del>	□Add
			□Remove
			□Change
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			□Remove
		<del></del>	□Change
			□Add
			Remove
			□Change

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0	f my name as the Authorized Person. It should be Michael Monroy as the Authorized Person of this LLC.
Ī	just need the Authorized Person to switch from saying STEAK N SHAKE to my name.
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	11/21/2019
effe <u>e:</u>	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
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Filing Fee: \$25.00