

L19000286994

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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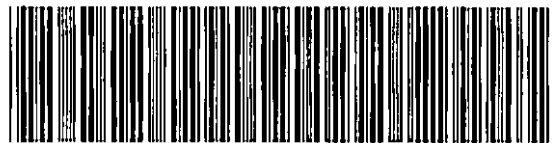
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

D BRUCE  
AUG 27 2020

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Floribbean Eatery and Catering, 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:

Salvatore Merola, Jr.

Name of Person

Floribbean Eatery and Catering, LLC

Firm/Company

2410 Central Ave

Address

St. Petersburg, FL 33712

City/State and Zip Code

Smerol79@yahoo.com

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

For further information concerning this matter, please call:

Salvatore Merola, Jr

727

220-9018

at ( )

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 Address:

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

SECRETARY OF STATE  
TALLAHASSEE, FL

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

Floribbean Eatery And Catering, 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 November 18, 2019 and assigned Florida document number L19000286994.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

N/A

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:

(Principal office address MUST BE A STREET ADDRESS)

N/A

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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**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*

Florida

*City*

*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



**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

N/A

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(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 applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated July 7, 2020

Feb 11 1872

Signature of a member or authorized representative of a member

Salvatore R. Merola, Jr.

Typed or printed name of signee

**Filing Fee: \$25.00**

**UNANIMOUS WRITTEN CONSENT OF MEMBER(S)  
OF FLORIBBEAN EATERY AND CATERING, LLC**

We, the undersigned, constituting all the Member(s) of **FLORIBBEAN EATERY AND CATERING LLC, (the "Company")**, hereby consent(s) to the adoption of the following resolutions, effective immediately:

1) Salvatore R. Merola, Jr., has decided to resign as Manager of the Company and upon signing this consent hereby resigns as Manager of the Company; and the Company hereby accepts such resignation. As such it is:

RESOLVED, Mr. Merola shall no longer be a Manager of the Company.

FURTHER RESOLVED, Mr. Merola is hereby authorized to file Articles of Amendment to the Articles of Organization removing himself as Manager.

AS A RESULT, upon execution of this Consent, Steven A. Salyards shall be the Sole Manager of the Company.

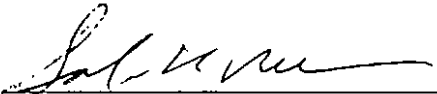
EACH MEMBER has executed this unanimous written consent this July 7, 2020.

*This consent may be executed in several counterparts all of which shall constitute one consent. Signature delivery via telecopy, electronic or email shall be deemed an original for the purposes of this consent.*

**BY SIGNING BELOW EACH MEMBER APPROVES THE FOREGOING CONSENT.**



MEMBER – Steven A. Salyards



MEMBER – Salvatore R. Merola, Jr