

L200000 42405

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

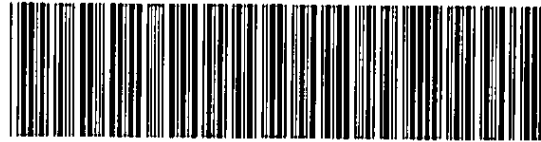
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800349811938

08/10/20---01043---025 **00.00

SEP 29 2020

S. YOUNG

FILED
2020 AUG 10 PM 5:45
CLERK OF COURT
JANET L. HARRIS
CLERK OF COURT
JANET L. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Big Zoe's Caribbean Kitchen
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:

Jocelyn Faurisma

Name of Person

Big Zoe's Caribbean Kitchen

Firm/Company

2731 S.W. 19th Street

Address

Fort Lauderdale, Fla 33312

City/State and Zip Code

bigzoescaribbeankitchen1804@gmail.com

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

For further information concerning this matter, please call:

Tammara Sutton

Name of Person

at (756) 867-3110

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

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

Big Zoe's Caribbean Kitchen LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2020 AUG 10 PM 5:45
CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
THE COUNTY OF DADE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 2/16/2020 and assigned
Florida document number L20000042425

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:

(Principal office address MUST BE A STREET ADDRESS)

1931 Cordova Road
1013
Fort Lauderdale, Fla 33316

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2731 S.W. 19th Street
Fort Lauderdale, Fla 33312

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

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>
CEO - AMBR	Tammara Sutton	2731 S.W. 19 th Street	☒ Add
		Ft. Lauderdale, Fla 33312	☐ Remove
			☐ Change
AMBR	Tammara Sutton	2731 S.W. 19 th Street	☒ Add
		Ft. Lauderdale, Fla 33312	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

Please Add EIN# 85-1516529

E. Effective date, if other than the date of filing: 6/1/2020 (optional)

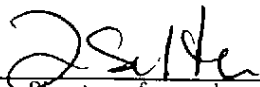
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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

6/1/2020



Signature of a member or authorized representative of a member

Tammara Sutton

Typed or printed name of signee