

L20 000158411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

(Document Number)

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S. YOUNG

L20 000158411 AUG 12 2020

TO: Registration Section
Division of Corporations

SUBJECT:

Islandrush Foodtruck 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:

Jane Remelius

Name of Person

Firm/Company

3484 N.W. 32nd Street

Address

Lauderdale Lakes FL 33309

City/State and Zip Code

Islandrush2019@gmail.com

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

For further information concerning this matter, please call:

Jane Remelius

Name of Person

at

954

Area Code

716-2650

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

TO
ARTICLES OF ORGANIZATION
OF

Islandrush Foodtruck 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 June 09, 2020 and assigned
Florida document number L20000158411.

This amendment is submitted to amend the following:

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

Islandrush Foodtruck LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3484 N.W. 32nd Street
Lauderdale Lakes FL
33309

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3484 N.W. 32nd Street
Lauderdale Lakes FL 33309

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:

June Remous

New Registered Office Address:

3484 N.W. 32nd Street

Enter Florida street address

Lauderdale Lakes, Florida 33309

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

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	June Remelius	3484 N.W. 32nd St Lauderdale Lakes FL 33309	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change
MGR	Junior Angus	3484 N.W. 32nd St Lauderdale Lakes FL 33309	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change
AMBR	Jannette Phipps	6211 N.W. 26th Ct Sunrise FL 33313	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change
AMBR	Jules Dolce	3484 N.W. 32nd St Lauderdale Lakes FL 33309	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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)

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.

June 26 2020

Signature of a member or author

Signature of a member or authorized representative of a member

June Helm

Typed or printed name of signee

Filing Fee: \$25.00