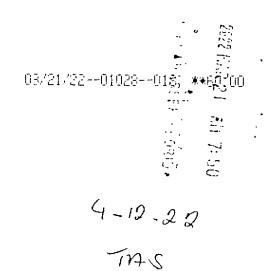


(Re	equestor's Name	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

Registration Section
Division of Corporations

Tallahassee, FL 32314

TO:

P&E CRUI	SIN EATERY, LLC		
SUBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	PATRICIA HEFLIN		
		Name of Person	
	HEFLINS CRUISIN EATI	ERY, LLC	
	_	Firm/Company	·
	253 COUNTRY COTTAG	SE LANE	
		Address	
	WINTER GARDEN FLOI	RIDA 34787	
		City/State and Zip Code	
	HEFLINSCRUISINEATER		
	E-mail address: (to be used for future annual report not	ification)
For further information of	concerning this matter, please c	all:	
PATRICIA HEFLIN		407 670-8657	
Name o	of Person		ne Telephone Number
Enclosed is a check for t	he following amount:		0
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration		<u>Street Address:</u> Registration Se	ection
Division of C	Corporations	Division of Co	
P.O. Box 632	27	The Centre of	l allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

P&E CRUISIN EATERY, LLC		
(<u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appears on our recor a Limited Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability C	Company were filed on 04/09/2021	and assigned
Florida document number L21000165331	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
HEFLINS CRUISIN EATERY		
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address if applicables		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		7. 5(0.21)
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records, <u>ente</u>	r the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
- :	Enter Florida street addr	ess
		lorida
	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>	Type of Action
MGR	EARLE RIVERS	253 COUNTRY COTTAGE LANE	🗆 Add
		WINTER GARDEN FLORIDA 34787	Remove
			□Change
MGR	WILLIAM HEFLIN SR	1000 SAN DOMINGO RD	■Add
		ORLANDO FLORIDA 32808	□Remove
			□Change
MGR	AMBROSIA GRAHAM	5211 GOLD TREE COURT	DANIE .
		ORLANDO FLORIDA 32808	☐Remove
			□Change
			Add
			□Remove
		<u> </u>	□ Change
			🗖 Add
			Remove
			Change
			□ Remove
			Change

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	7.5	•
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		7
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 605.0	0207 (d as t
If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than Note: If the date inserted in this block does not meet the applicable statutory filing requires.	90 days after filing.) Pursuant to 605.0	0207 d as i
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If an effective date is fisted, the date must be specific and cannot be prior to date of filing or more than Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records. e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the other contents of the conte	90 days after filing.) Pursuant to 605.6 rements, this date will not be liste	d as t
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Filing Fee: \$25.00