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## **COVER LETTER**

Registration Section Division of Corporations

(JECT:	YISTON	GREAT Name of Limited Link	F&D	DRINKS	AIN ENTERT		
	icles of Amendment and		`				
return all correspondence concerning this matter to the following:							
	-	ROHACU	KeH ame of Person	DRICK			
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m <u>r.G</u>	PIM es		at ( <u>3</u> 86_) _ Area Code	Daytime Teleph	9229.		
ed is a che	eck for the following amo	ount"					
∴ 00 Film	-	ie of Status	55.00 Filing Fee Jertified Copy additional copy is ei		S60.00 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

(151045 Restaurant & Lounge LLC
(Name of the Limited Liability Company as it now appears on our records.) viticles of Organization for this Limited Liability Company were filed on Tuly 28TH 2021 and assigned to document number 421000341306 amendment is submitted to amend the following: flamending name, enter the new name of the limited liability company her GLEAT FOOD DRIVER & EMTERTAINMENT LCC ev name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." r new principal offices address, if applicable: exipal office address MUST BE A STREET ADDRESS) r new mailing address, if applicable: ing address MAY BE A POST OFFICE BON) If amending the registered agent and/or registered office address on our records, enter the name of the new registered : and/or the new registered office address here: HUBERT GRIMES

- 927 Beylle RD Suite 101

Enter Florida street address

South Daytona Florida Fl 32119

Lip Code Name of New Registered Agent: New Registered Office Address:

· Registered Agent's Signature, if changing Registered Agent:

city accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the silons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability any has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

. . . . . .

nending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added amoved from our records:

## 12 = Manager

.3R = Authorized Member

	<u>Name</u>	Address	Type of Action
_			[JAdd
			☐Remove
			□Change
			DAdd
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If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Effective date, if other than the date of filing: (optional) 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) Enter If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 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

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 force: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be a cument's effective date on the Department of State's records.

The effective date on the Department of State's records.

The effective date on the date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day at its filed.

The effective date of a member of authorized representative of a member.

Typed or printed name of signee.

Filing Fee: \$25.00