## L24000364730

(Requestor's Name)
(Keduesioi s Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
<b>(</b> ,
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11/08/22--01013--006 \*\*25.00

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## **COVER LETTER**

TO: Registration Division of C			
	HE BAR, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	THOMAS BARNETT		
		Name of Person	
	REFIT THE BAR, LLC		
		Firm/Company	
	2874 SE RAWLINGS RD		
		Address	_ <del></del>
	PORT ST LUCIE/FL 349:	52	
		City/State and Zip Code	
	REFITTHEBAR@GMAIL		38: 3: .
For further information	n-mail address: i i concerning this matter, please c	to be used for future annual report not all:	meation)
THOMAS BARNETI		443 856-9544	
Name	e of Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for	r 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 Adds		Street Address:	ection
Registration Section Division of Corporations		Registration So Division of Co	
P.O. Box 6	327	The Centre of	Tallahassee
Tallahassee	t, FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 HAR 17 AM 8: 03

mpany as it now appears on our records.) ited Liability Company)	
sany were filed on $\frac{8/13/2021}{2}$	and assigned
liability company here:	
iability Company," the designation "LLC" or the abbrevia	ation "L.L.C."
N/A	
5)	
N/A	
	<u>-</u>
	·
ice address on our records, enter the name of	the new regis
Every Elvida serve al Divis	
Enter r toriau street adaress	
Florida	ip Code
<u> </u>	iability company here:  iability Company," the designation "LLC" or the abbrevia N/A  N/A  N/A  Enter Florida street address  Florida

## 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 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>	Name	Address	Type of Action
		N/A	□ Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			Remove
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			Change
			□Add
			□Remove
			□Change

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Flective date, if other than the date of filing:  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  one: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as actument's effective date on the Department of State's records.  record specifies a delayed effective date, but not an effective time, as 12:01 a.m. on the earlier of: (b) The 90th day after the is filed.			
Flective date, if other than the date of filing:			
Flective date, if other than the date of filing:			
flective 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  office. If the date inserted in his block does not meet the applicable statutory filing requirements, this date will not be listed as scument's effective date on the Department of State's records.  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 is filed.  ated  March 10  2023			
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ated	March 10	2023	
Signature of a member or authorized representative of a member	Dated	··	
Signature of a member or authorized representative of a member	-5/	RIA	
and the second to the second t		Signature of a member or authorized representative of a member	<del></del>
		Typed or printed name of signee	<del></del>

Filing Fee: \$25.00



January 30, 2023

THOMAS BARNETT 2874 SE RAWLINGS RD PORT ST LUCIE, FL 34952

SUBJECT: REFIT THE BAR LLC Ref. Number: L21000364730

We have received your document for REFIT THE BAR LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "Limited Company" or Limited Liability Company or with one of the following abbreviations Ltd. Co., LC, "L.C.," LLC, or L.L.C.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 023A00002216

Anissa Butler Regulatory Specialist II

MAR 17 2003