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## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

**Division of Corporations** TWEETY BIRD MARCOS LLC SUBJECT: 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: BENJAMIN FINLEY Name of Person MARCOS PIZZA Firm/Company 6616 HORNBUCKLE BLVD Address NORTH PORT, FL 34291 City/State and Zip Code benkristi@bellsouth.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: benjamin finley Daytime Telephone Number Name of Person Enclosed is a check for the following amount: \$25.00 Filing Fee □ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address: Street Address: **Registration Section** Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TWEETY BIRD MARCOS LLC	
(Name of the Limited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Company were filed on $\frac{11-1}{1}$ Florida document number $\frac{L21000495390}{L21000495390}$ .	7-2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company her	<u>e</u> :
FLYING GROUPER PIZZA LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the de-	
Enter new principal offices address, if applicable:	2021 D
(Principal office address MUST BE A STREET ADDRESS)	
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-	
Enter new mailing address, if applicable:	<u>ිගු සු U</u>
(Mailing address MAY BE A POST OFFICE BOX)	32
<del></del>	•
B. If amending the registered agent and/or registered office address on our recagent and/or the new registered office address here:	cords, <u>enter the name of the new register</u>
Name of New Registered Agent:	
New Registered Office Address:  Enter Florid	la 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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
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			□Remove
			Change
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