122000053259

(Req	uestor's Name)	
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bbA)	ress)	
(City	/State/Zip/Phon	e #)
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Special Instructions to F	iling Officer:	
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A. BUTLER MAY 1 1 2022

COVER LETTER

	ision of Cor		_	
		RED BULL BBQ, LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	l Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		ROBERT BARTELMAY		
			Name of Person	
		RED BULL BBQ, LLC		
		-	Firm/Company	
2181 INDIAN ROCKS ROAD S. SUITE I				
Address				
	LARGO, FL 33774			
			City/State and Zip Code	
		Robbartelmay@gmail.com		
For further in	nformation c	n-mail address: (oncerning this matter, please of	to be used for future annual report no all:	outreation)
Rob Bartelm	nay		727 458-8182	
	Name o	f Person	at () Area Code Dayti	me Telephone Number
Enclosed is a	i check for th	ne following amount:		
■ \$25.00 F	Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	iling Addres		Street Address: Registration S	ection
Registration Section Division of Corporations		Division of Co	Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		The Centre of 2415 N. Mont	Tallahassee oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REPUBLICATION AND 6: 32

SECRETARY OF STATE OF TALLAHASSEF, EL	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
	ability Company were filed on January 31, 2022	and assigned
Florida document number L22000053259		
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC" o	r the abbreviation "L.IC."
Enter new principal offices address, if applica	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE I	<u>BOX)</u>	
B. If amending the registered agent and/or reagent and/or the new registered office address	egistered office address on our records, <u>enter the</u> <u>s here</u> :	e name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	daZip Code
	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>	Address	Type of Action
	Robert Bartelmay	2181 Indian Rocka Road S., Suite I	□Add
		Largo, FL 33774	Remove A
			· Change
MGRM Teri Wilford	Teri Wilford	1605 Miller Ave	□Add
		Clearwater, FL 33756	□Remove
			■Change .
AR Nicola McConnell	Nicola McConnell	2181 Indian Rocks Rd. S. Suite 1	
		Largo, FL 33774	≣Remove
			Change
			□Add
			□Remove
			□Change
			□ Add
		□Remove	
		🗆 Add	
		□ Remove	
			□Change

amending any other information	ion, enter change(s) here: (Attach additional sheets, if necessary.)
_	
	
	<u> </u>
_	
Effective date, if other than the If an effective date is listed, the date mus Note: If the date inserted in this blidocument's effective date on the Di	e date of filing: (optional) ist be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 slock does not meet the applicable statutory filing requirements, this date will not be listed Department of State's records.
e record specifies a delayed effectiv rd is filed.	ve date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
March 6	2022
Dated	
1/01	Mr
	Signature of a member or authorized representative of a member
Robert Bartelmay	
	Typed or printed name of signee

Filing Fee: \$25.00



RECEIVED

2022 APR 12 AM 7:46

SECKETANT OF STATE TALLAHASSEE, FL

March 24, 2022

ROBERT BARTELMAY 2181 INDIAN ROCK ROAD SUITE 1 LARGO, FL 33774

SUBJECT: RED BULL BBQ, LLC Ref. Number: L22000053259

We have received your document for RED BULL BBQ, 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 titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

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.

Anissa Butler Regulatory Specialist II

Letter Number: 022A00006893

Please see changes + corrections. Thank you.