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## COVER LETTER

TO: Registration Section
Division of Corporations

JOHNSTON SUBJECT:	N'S SOUTHERN STYLE RESTA	AURANT, LLC I	
	Name of Limite	d Liability Company	_
The enclosed Articles of	Amendment and fee(s) are subm	tted for filing.	
Please return all correspo	ndence concerning this matter to	the following:	
	H	G Bennett - Tittle - MGR	
		Name of Person	<del></del>
	Jo	   bhnston's Locker Plant, Inc.	
	<del>- / = -</del>	Firm/Company	
		1480 W Washington St	
		Address	<del></del>
		Monticello, FL32344	
		City/State and Zip Code	
		a)johnstonsmeatmarket.com bejused for future annual report notification)	_
For further information co	oncerning this matter, please call		
Becky Bennett - Title - A	MBR	850 997-5622	
Name of Person		Area Code Daytime Telephone Num	nber
Enclosed is a check for th	e following amount:	1	
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certif (additional copy is enclosed) Certif	Filing Fee. Teate of Status & Ted Copy Teal copy is enclosed)
Mailing Address Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303	e 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JOHNSTON'S SOUTHER	RN STYLE RESTAURAN	IT, LLC	
(Name of the Limited Liability (A Florida I	Company as it now appear imited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Co	mpany were filed on	February 22, 2022	and ass
This amendment is submitted to amend the following:	<del>.</del>		
A. If amending name, enter the new name of the limit	ed liability company he	ere:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the d	esignation "LLC" or the ab	breviation "L.I
Enter new principal offices address, if applicable:			<del></del>
 <u>Principal office address MUST BE A STREET ADDRI)</u>	ess)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			2023 FEB 13
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our r	ecords, <u>enter the nam</u>	e of the new
Name of New Registered Agent:			
New Registered Office Address:	7" , 431	rida street address	
j	Enter Flor	raa sireei aaaress	
	City	, Florida	Zip Code
l e e e e e e e e e e e e e e e e e e e	*		

## 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 provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this docume 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 r	manage, <u>ent</u>	ter the title, i	name, and	address of e	ach person
or removed from our records:					

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of
AMBR Nicholas G Griner	1480 W Washington St.		
	Monticello, FL 32344	<b>=</b> Ren	
	<u> </u>	□Cha	
AMBR Becky Bennett	1480 W Washington St.		
	Monticello, FL 32344	□Rem	
			□Char
		□Add	
		□Remo	
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In addition, we are adding the	e attached JOHNSTON	S SOUTHERN STYLE RESTAURANT, L	.LC
Operating Agreement, ratific	d by Resolution on Febr	ruary 10, 2023: See Attached Operating Agr	reement
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			<del>-</del> -
	t be specific and cannot be ock does not meet the a	prior to date of filing or more than 90 days after f pplicable statutory filing requirements, this	iling.) Pursuant to
ecord specifies a delayed effectives filed.	e date, but not an effect	ive time, at 12:01 a.m. on the earlier of: (b)	The 90th day
February 13	2023		
Y /	<del></del>		
/ / /	el 11.70		
	Signature of a member or	authorized representative of a member	
Hal G Bennett - Title - N	-	authorized representative of a member	

Filing Fee: \$25.00