

To:

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2022-01-03 15:26:37 GMT

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From: Natalie Burr

1/3/23, 10:10 AM

L220000/83958

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : BURNS LAW OFFICES, P.A.
Account Number : 120140000036
Phone : (305)733-8223
Fax Number : (866)383-7019

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LINDSEY'S CAFE & RESTAURANT LLC

Certificate of Status	0
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JAN 04 2023

A. LUNT

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Corporate Filing Menu

Help

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

(((H23000000634 3)))

LINDSEY'S CAFE & RESTAURANT LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/04/2022 and assigned
Florida document number L22000183958.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

MANUEL TORRES SEGUNDO

New Registered Office Address:

5776 JOG ROAD

Enter Florida street address

LAKE WORTH

Florida 33467

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

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FILED
 JAN 3 2023
 11:27 AM
 TALLAHASSEE, FL
 CLERK OF CIRCUIT COURT

(((1123000000634 3)))

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>	<u>Address</u>	<u>Type of Action</u>
OMGR	BRYAN SILVERSTONE	5776 JOG ROAD	<input type="checkbox"/> Add
		LAKE WORTH, FL 33467	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
VOMR	ARTHUR SILVERSTONE	5776 JOG ROAD	<input type="checkbox"/> Add
		LAKE WORTH, FL 33467	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MANUEL TORRES SEGUNDO	5776 JOG ROAD	<input checked="" type="checkbox"/> Add
		LAKE WORTH, FL 33467	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

2022 JAN -3 AM 11:27

THE UNIVERSITY OF CHICAGO

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated DECEMBER 30 2022

B

Signature of a member or authorized representative of a member

BRYAN SILVERSTONE

Typed or printed name of signee

$$(((112300)0000634\ 3)))$$