# 123000020532

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(D. 43) wheel
(Document Number)
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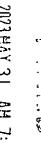
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## **COVER-LETTER**

TO:

Registration Section
Division of Corporations

Division	n oi Corpoi	TATIONS	•				
SUBĴECT:	Day	tona Barbecu	e LLC				
		Name of Limi	ted Liability Company				
The enclosed Art	ticles of Am	endment and fee(s) are sub-	mitted for filing.				
Please return all	corresponde	ence concerning this matter	to the following:				
		Asl	nley McCurrie	Э			
	Name of Person						
		Daytona	a Barbecue L	LC			
	Firm/Company						
	53 Highridge rd.						
	Address						
		Dayto	na Beach Fl	. 32117			
	_		City/State and Zip Code	<del></del>	<u>m</u>		
For firether inform	mation conc	E-mail address: (1 erning this matter, please ca	to be used for future annual re	port notification)			
_		McCurrie	at (386 )	333-29	50		
	Name of Pe	rson	Area Code	Daytime Telephor	ie Number		
Enclosed is a che	eck for the f	ollowing amount:					
🗙 \$25.00 Filing	g Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## Daytona Barbecue LLC

2023 HAY 31 AM 7: 38

The Articles of Organization for this Limited Liability Company were filed on January 9, 2023 and assigned Florida document number <u>L23000020532</u>.

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited	Liability Company," the designs	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u>-</u>
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	ice address on our record	ls, enter the name of the new registe
	ice address on our record	ls, enter the name of the new registe
agent and/or the new registered office address here:	ice address on our record	ls, enter the name of the new registe
agent and/or the new registered office address here:  Name of New Registered Agent:	ice address on our record  Enter Florida str	

### 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	<u>Address</u>	Type of Action
AMBR	Daniel McCurrie	53 Highridge rd.	🗆 Add
		Daytona Beach FL. 32117	<b>X</b> Remove
AMBR	Ashley McCurrie	53 Highridge rd.	XAdd
		Daytona Beach FL 3211	7 □Remove
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
<del></del>			□Add
			□Remove
			□Change
			□Remove
			Change

-	
n effecti <u>ite:</u>   If i	date, if other than the date of filing:
ecord s is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after th
ted	May 17, 2023  ashley Mccurrie
	able Marrie
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00