## L2400000007

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SECRETARY OF STATE
TALLAHASSEE, FL

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## **COVER LETTER**

	Registration Se Division of Cor				
SHRIFC		ition Greeks Clearwater Beach.	LLC		
For furth Anthone		Name of Lim	ited Liability Company		
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
			_		
		Anthone Damianakis, Esq.			
		Anthone Damianakis, Esq.  Name of Person Peacock, Gaffney & Damianakis, P.A  Firm/Company  2348 Sunset Point Road  Address Clearwater. Fl 33765  City/State and Zip Code tony@pgdlaw.net  E-mail address: (to be used for future annual report notification)  concerning this matter, please call:  127			
		Peacock, Gaffney & Dami	anakis, P.A		
			Firm/Company	<del></del>	.s.
For furth Anthon Enclose		2348 Sunset Point Road			TALL TALL
		<del></del> .	Address		LAR T
For furth Anthon Enclose	Clearwater, Fl 33765				· PROBLE
			City/State and Zip Code		EE, S.
			to be used for future annual annual actific	initari	严与
For furth	er information c		•	(cation)	tri.
	Damianakis		727 796-7774		
	Name o	f Person		Telephone Number	_
Enclosed	l is a check for th	ne following amount:			
<b>■</b> \$25.	00 Filing Fee		Certified Copy	Certificate of Certified Copy	Status & y
	Mailing Addres Registration S		Street Address: Registration Sec	etion	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2nd Generation Greeks Clearwater Beach, LLC

(Name of the Limited Liability Compan (A Florida Limited Li	ny as it now appears on our records.) iability Company)	<del></del>
The Articles of Organization for this Limited Liability Company vi Florida document number <u>L24000070807</u> .	were filed on February 8,2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
2nd Generation Greeks Lutz, LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the a	bbreviation "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)		2024 NOV -6 PM SECRETARY OF TALLAHASSEE
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the nar</u>	ne of the now registered.
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	-	
I hereby accept the appointment as registered agent and agre	e to act in this capacity. I further ag	gree 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 Begistered 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
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	November 1, 2024	£
(If an eff Note:	ive date, if other than the date of filing:  (optional)  ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list sent's effective date on the Department of State's records.	
f the recor ecord is fi	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after led.	r the
Dated	11/4/24	?
	Signature of a member or authorized representative of a member	
	Δ	

Filing Fee: \$25.00