

104000003208

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

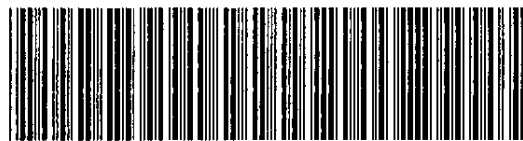
Special Instructions to Filing Officer:

**A. LUNT**

MAR 22 2010

**EXAMINER**

Office Use Only



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02/25/11--01007--020 \*\*30.00

2011 MAR 21 PM 2:22  
STATE CLERK OF STATE  
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 1, 2011

GERALD R. GABET JR.  
1186 SALT MARSH CIR.  
PONTE VEDRA BEACH, FL 32082

SUBJECT: JACKSONVILLE DINING CONCEPTS, LLC  
Ref. Number: M04000003208

We have received your document for JACKSONVILLE DINING CONCEPTS, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6094.

Agnes Lunt  
Regulatory Specialist II

Letter Number: 711A00005013

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Jacksonville Dining Concepts, LLC**  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gerald R Gabet Jr

Name of Person

Jacksonville Dining Concepts LLC

Firm/Company

1186 Salt Marsh Circle

Address

Ponte Vedra Beach, Florida 32082

City/State and Zip Code

jgabet@copelandsjacksonville.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gerald R Gabet Jr

Name of Person

at ( 904 )

371-2796

Area Code & Daytime Telephone Number

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TALLAHASSEE, FL 32301  
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Enclosed is a check for the following amount:

- ☐ \$25.00 Filing Fee    ☒ \$30.00 Filing Fee & Certificate of Status    ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☐ \$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/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY  
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)

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TALLAHASSEE  
MAY 11 2011

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1. The name of the limited liability company as it appears on the records of the Florida Department of State is: JACKSONVILLE DINING CONCEPTS, LLC
2. This entity was formed under the laws of: NORTH CAROLINA
3. This entity was authorized to transact business in Florida on 3/30/2006 and its Florida document/registration number is 104000003208
4. The name and address of each manager or managing member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

GERALD R GABET JR  
1186 SALT MARSH CIRCLE  
PONTE VEDRA BEACH, FL. 32080

Required Signature: \_\_\_\_\_

Signature of Manager, Managing Member or Member

Filing Fee: \$25