(Requestor's Name)							
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(Address)							
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(City/State/Zip/Phone #)							
PICK-UP	MAIT WAIT	MAIL					
(Business Entity Name)							
(Document Number)							
Certified Copies	Certificate	s of Status					
Special Instructions to Filing Officer:							
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Office Use Only



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COVER LETTER

TO:	Registration Section Division of Corporations							
SUBJ	UBJECT: West End Restaurants, LLC Name of Foreign Limited Liability Company							
Dear S	Sir or Madam:							
	nclosed Affidavit by Foreign Limging Member(s) and fee(s) are su		-		Change Mar	nager(s) or		
Please	return all correspondence conce	rniı	ng this ma	tter to the foll	owing:			
	Aileen McCormic	<u>k_</u>						
	Name of Person			_				
	West End Restaurants	i. L	.LC			7 2		
Firm/Company				· · · · · · · · · · · · · · · · · · ·		SEE SEE		
	200 31st Avenue North, S	2mi	te 100			IZ SEP 27 AM '9: 33 EGRETARY OF STATE LAHASSEE, FLORID)		
	Address	<u> </u>	100	· · · · · · · · · · · · · · · · · · ·		27 ARY SSE		
	ridaloss					연유 프		
Nashville, TN 37203					.S.1 .S.1 .W.			
City/State and Zip Code						RATE S		
	aileen@bricktop	s.c	com			- ω		
<u>F</u>	E-mail address: (to be used for fut			port notificati	on)			
For fu	rther information concerning this	m	atter, plea	se call:				
	Aileen McCormick a	t (615)		292-0188			
	Name of Person	. (_		e and Daytim	e Telephone	Number		
	STREET/COURIER ADDRESS Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	:		MAILING Al Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations			
	sed is a check for the following Filing Fee \$\bigcup \text{Status}\$ \$30\$ Filing Fee & Certificate of Status	Z.		0 Filing Fee & 1 Copy	\$60 Filing Certificate o	f Status &		

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

1. The name of the limited liability companion Department of State is: We	y as it appears on the records of the Florida st End Restaurants, LLC.
2. This entity was formed under the laws of	:
3. This entity was authorized to transact bus and its Florida document/registration number	siness in Florida on12/13/2005 er is M05000006858
4. The name and address of each manager of	or managing member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Ledbetter, Joseph 200 31st Avenue North, Suite 100 Nashville, TN 37203
MGRM	Brunnberg, Tom 200 31st Avenue North, Suite 100
· • • • • • • • • • • • • • • • • • • •	Nashville, TN ZUZ SEP 2:
· · · · · · · · · · · · · · · · · · ·	7 AM 9: 3: E. FLORID
· · · · · · · · · · · · · · · · · · ·	
Required Signature: Signature of Manager,	Managing Member or Member

Filing Fee: \$25