## L08000025848

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SECRETARY OF STATE CHYSICAL OF CORPORATIONS OF CORPORATIONS

J. BRYAN

OCT - 6 2008

EXAMINER

## **COVER LETTER**

TO: Registration S Division of Co.			
SUBJECT:	FIREHOUS	E GRILLZ, LLC	0
		ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		BIBIAN LEYVA	
		(Name of Person)	
		FIREHOUSE GRILLZ	<b>8</b>
(Firm/Company)			OB OCT -3 PH 1: 18
	:	2335 SW 19TH TERRACE	သ ငြို့
		(Address)	PH RPUN
		MIAMI, FL 33145	<u> </u>
		(City/State and Zip Code)	
	concerning this matter, please c		
	A LEYVA of Person)	at ( 786 ) 223.7923 (Area Code & Daytime T	'elenhone Number)
Enclosed is a check for		(Alea Code de Daylinie I	ereprote Number)
\$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 Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 3230	ons er Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	FIREHOUS	E GRILLZ, LLC			
(Name of the Limite	d Liability Comp	any as it now appears on our records Liability Company)	<u>r)</u>		
(	A FIORIGA Elimited	Elability Company)	0		
The Articles of Organization for this Limited Liability Company were filed on 03 / 12 / 2008 as 3					
Florida document numberL08000025848	00 92				
			OF CORPORATIONS		
This amendment is submitted to amend the fol	lowing		3 000		
This affectament is submitted to affecte the for	3 P. S.				
A. If amending name, enter the new name of	of the limited lia	bility company here:			
N/A			(a) (b)		
The new name must be distinguishable and end w "L.L.C."	ith the words "Lin	nited Liability Company," the designat	ion "LLC" or the abbreviation		
Enter new principal offices address, if appli	cable:	N/A			
(Principal office address MUST BE A STRE	ET ADDRESS)				
Enter new mailing address, if applicable:		N/A			
(Mailing address MAY BE A POST OFFICE	( ROX)				
(Maning daniess M/11 DE /11 OST OTT ICE	<u> </u>				
B. If amending the registered agent and	/or registered (	office address on our records, er	oter the name of the new		
registered agent and/or the new registered of					
Name of New Registered Agent:	N/A				
New Registered Office Address:	N/A	(Enter Florida stre	pet address)		
		(Line) 1 William	io ama cooj		
	<del></del>	, Florid			
		(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 608, 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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action			
Т	CHRISTOPHER A.THOMAS	11385 WOODCHUCK LANE BOCA RATON, FL 33428	Add Remove			
Т	BOSWELL BROWN	11385 WOODCHUCK LANE BOCA RATON, FL 33428	Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
	_		Add Remove			
D. If a	mending any other information, enter c	hange(s) here: (Attach additional sheets, if necessary.)				
	PLEASE REMOVE BOSWELL BROWN	N, WHO CURRENTLY HOLDS THE POSITION OF	OB OCT			
	TREASURER FROM THE CORPORATION DOCUMENTS PERTAINING TO FIREHOUSE					
	GRILLZ, LLC. PLEASE ADD CHRISTOPHER A. THOMAS AS TREASURER.					
			OF STATE OF			
Dated _	SEPTEMBER 29th, 2008  Signature of a mo	ember or authorized representative of a member	<u>.</u>			
	7	BIBIANA LEYVA				
Typed or printed name of signee						

Page 2 of 2

Filing Fee: \$25.00