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COVER LETTER

TO: Registration Section , Division of Corporations
SUBJECT: Boss Brother's Gill 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:
Thomas M. Boss Jr. Name of Person
Boss Brothers Grill LLC Firm/Company
Firm/Company
21980 SW 86+5 St. Address
Address
Dunnellon, FL 34431 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Thomas Boss Jr. at (352) 427-9735 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$30.00 Filing Fee \$\ \text{S30.00 Filing Fee & Certificate of Status} \text{S55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}
Would like new (additional copy is enclosed) Certificate of Startus
MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Boss Broth	ner's G	ici))	LLC			
(Name of the Limited L (A F	iability Compar Iorida Limited L	ny as it now Jiability Con	appears on on on one on one one one one one one	ur records.)		
The Articles of Organization for this Limited Liab Florida document number <u>L0900079</u>		were filed	on August	17, 2009	_ and assig	ŗned
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of t	he limited liab	ility compa	ny here:			
Local Legends LL	-C					
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability	Company," th	e designation "LLC	" or the ab	breviation
Enter new principal offices address, if applicat	ble:	(SAM	É)			SEC SEC
(Principal office address MUST BE A STREET			20430 Donnellon,	E Pennsylvar DL 34432	<u>ι ω</u>	TAT COL
Enter new mailing address, if applicable:		SAME	<u>:) </u>	11		200
(Mailing address MAY BE A POST OFFICE B	<u>0X)</u>		21980 s	5W 86+5 5	27. ω 1	0H,
B. If amending the registered agent and/or registered agent and/or the new registered offi		fice addre				
Name of New Registered Agent:	(SAME)	Thom	us M. Bos w 861 5	<u>s, Jr.</u>	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		21	180 SI	N 8615 5-	<u>}. </u>	
	ומטר	rellon	Enter Flo	orida street addres , Florida <u>4</u>	5 3443 7: Codo)
New Registered Agent's Signature, if changing Re	gistered Agent:	City			Zip Code	
I hereby accept the appointment as registered the provisions of all statutes relative to the pro accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this cl	oper and comp tered agent as p egistered office hange. (5 AY)	olete perfor provided fo address, l	mance of my or in Chapter hereby confi	duties, and I am 608, F.S. Or, if i	familiar v this docum ed liability	with and nent is

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Title** Type of Action Address Name William Boss Craig Spitznogle MGRM Add Remove mbrm ☐ Add ☐ Remove ∏ Add Remove \square Add ☐Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) We would like to change the name Boss Brother's Grill LLC to Local Legends LLC. additional paperwork is attached. Avoust Dated_ Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00