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((H19000068393 3))



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To: Division of Corporations  
Fax Number : (850) 617-6393

From: *Maria Velez*  
Account Name : PLANET HOLLYWOOD INTERNATIONAL, INC  
Account Number : I20080000100  
Phone : (407) 903-5513  
Fax Number : (407) 352-7310

2019 FEB 28 AM 11:17  
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*Please fax confirmation to*



\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: *mvelez@planethollywoodintl.com*

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
CG (PAYROLL), LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

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S. PRATH

2019 FEB 23 PM 10:02

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

H19000068

2019 FEB 28 AM 11:17  
FILED  
TALLAHASSEE FL

CG (Payroll), LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 2/16/2018 and assigned  
Florida document number L18000043178.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Restaurant (Payroll), LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "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)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida street address

\_\_\_\_\_, Florida \_\_\_\_\_  
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 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 Registered Agent, Signature of New Registered Agent

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being  
or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

