

M1600009436
Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383
From: Account Name : GREENSPOON MARDER, P.A.
Account Number : 076064003722
Phone : (888)491-1120
Fax Number : (954)343-6962

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

Email Address: licensing@sbc.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SBE RESTAURANT GROUP, LLC

Certificate of Status	0
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Estimated Charge	\$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 30 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SBE Restaurant Group, LLC

Name of Limited Liability Company

Dear Sir or Madam;

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ellen Gilmore, Esq.

Name of Person

Greenspoon Marder, P.A.

Firm/Company

200 E. Broward Blvd., Ste 1800

Address

Fort Lauderdale, FL 33301

City/State and Zip Code

licensing@sbe.com

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

For further information concerning this matter, please call:

Ellen Gilmore

Name of Person

at (

954

) Area Code

491-1120

Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

\$25 Filing Fee

\$30 Filing Fee &
Certificate of Status

\$55 Filing Fee &
Certified Copy

\$60 Filing Fee,
Certificate of Status &
Certified Copy

CR2E062 (9/15)

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

FIRST: The name of the limited liability company is: SBE Restaurant Group, LLC

SECOND: The Florida Document number of the limited liability company is: M16000009436

THIRD: Document to be corrected is: Application by Foreign Limited Liability Company For Authorization to Transact Business in Florida

CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT

[X] Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: The correct title for SBEEG Holdings, LLC is Member and not Manager.

OR

[] Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Blank lines for describing defectively signed details.

OR

[] The electronic transmission of the record was defective.

Signature of Authorized Representative: [Handwritten Signature] Date: 11/29/14

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Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

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.

Registered Agent's Signature

Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)