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COVER LETTER

TO:

Registration Section Division of Corporations

BAJA RESTAURANT GROUP, 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:

FRANK NERI

BAJA RESTAURANT GROUP, LLC

92 SW 3RD STREET #3004

Address

MIAMI, FL 33130

City/State and Zip Code

HOLA@BAJARESTAURANTGROUP.COM

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

For further information concerning this matter, please call:

FRANK NER

Name of Person

786, 417.9083

Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$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 ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BAJA RESTAURANT GROUP, LLC

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

	7. 1	09/27/20	16
The Articles of Organization for this Limited Liability Com Florida document number <u>L16000180263</u>	npany were filed on _		and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	l liability company l	<u>nere</u> :	
The new name must be distinguishable and contain the words "Limited	Liability Company," the	designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	<u> </u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered registered agent and/or the new registered office address	ed office address o	n our records, <u>enter</u>	the name of the new
Name of New Registered Agent:			JAN 23
New Registered Office Address:	······································		P more
	Enter Fl	orida street address	F. COR
	City	Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent's Signature, if changing Registered Agent's Age	•		say Cine
		ramanitu I femthan an	raa to comply with the
I hereby accept the appointment as registered agent and		r capacity, i juriner agi	

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

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	SERGHIO M	UNOZ	
		92 SW 3RD ST #30	004 Remove
		MIAMI, FL 33130) ☐ Change
			☐ Remove
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an effect	e date, if other than the date of filing: 01/01/2017 (optional) tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.00 (the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed	207 (3 as th
ocumen	nt's effective date on the Department of State's records.	
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the cord is filed.	of:
Pated	01/18/2017 12:01	
	Signature of a member or authorized representative of a member	
	FRANK NERI	

Page 3 of 3

Filing Fee: \$25.00