Aug 12 2019 09:41AM HP Fax 5616941639 8/12/2019 page 1 Division of Corporations



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		To:				
			Division of Corporations			
			Fax Number : (850)617-6383			
		From	:			
			Account Name : CORPORATE CREM	TIONS INTERNATI	ONAL INC. G	
			Account Number : 110432003053			
			Phone : (561)694-8107			
			Fax Number : (561)694-1639			
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page 2

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CORNER CAFE OF TEQUESTA, LLC	
(<u>Name of the Limited Liability Company as h</u> (A Florida Limited Liability	now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were Florida document number <u>L03000017219</u> .	filed on 05/13/2003 and assigned
This amendment is submitted to amend the following:	5
A. If amending name, enter the new name of the limited liability o	ompany here:
The new name must be distinguishable and contain the words "Limited Liability Cor	npany," the designation "LLC" or the abbreviation "L L.C."
Enter new principal offices address, if applicable:	E D
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·
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B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered office address here:

Name of New Registered Agent:	Corporate Creations Network Inc.		
New Registered Office Address:	11380 Prosperity Farms Road #221	F.	
	Enter Florida street address		
	Palm Beach Gardens	_, Florida 33410	
	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.

^D Ryan Sullivan, Special Secretary If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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

.

Title	Name	Address	Type of Action
MOR	HILL, JAMES R	289 US HWY. 1	🖸 Add
		TEQUESTA, FL 33469	Remove
			Change
MGR	Michael Wolford	289 US HWY. I	🗖 Add
		TEQUESTA, FL 33469	Ретюус
			Change
MGR	Peter Organsky	289 US HWY. 1	🖬 Add
		TEQUESTA, FL 33469	
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: ______ (optional) (If an effective 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 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated August 12 2019 Signature of a member or authorized representative of a member

Ryan Sullivan, Attorney-In-Fact

Typed or printed name of signee

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Filing Fee: \$25.00