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O SIMMONS NOV 2 7 2018



Florida Department of State Division of Corporations Attn: Octavia Simmons PO Box 6327 Tallahassee, FL 32314

Dear Octavia,

Enclosed please find 5 application to amend the registered agent on our restaurants. You have already received a check for Raving Fans Restaurant Group V, LLC.. I am enclosing a check for 100.00 for the other corporations.

Thank you so much for your kind attention to this matter. If you have any questions, please feel free to contact me at 813-657-3082.

Best regards,

ane Haskins Controller

COVER LETTER

Division of Corp	orations		
SUBJECT: Various	S RFRG Ently	e S ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are subm	mitted for filing.	
Please return all correspon	dence concerning this matter t	to the following:	
	Lane Haskins	Name of Person	
	Λ	0 1 0	
	Kaving fans k	Restaurant Group	LLC_
	6020 Winthr	op Town Ctre Av	<u> </u>
	Riverview, Fl	City/State and Zin Code	
		a tampalay. Yr	ication)
For further information co	ncerning this matter, please ca	dl:	
Sane Haski Name of	NS Person	at (<u>813</u>) <u>657-3</u> Area Code Daytime	CS 2 Telephone Number
Enclosed is a check for the	following amount:		
\nearrow \$25.00 Filing Fee \times $\cancel{H} = 100.00$	☐ \$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:

TO:

Registration Section

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

Raving Fans Ras	d Liability Compar	Frank T LA	ur records.)	
The Articles of Organization for this Limited Lia				3 and assigned
Florida document number <u>LD30000</u>	-		, , , , , , , , , , , , , , , , , , , 	una ussigned
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liabi	lity company here:		
The new name must be distinguishable and contain the wo	ords "Limited Liabili	ty Company," the designa	tion "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applica	ble:			
(Principal office address MUST BE A STREET	(ADDRESS)			4. 3
				13
				2
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE B	(OX)			1,475
				#-
B. If amending the registered agent and/o registered agent and/or the new registered off.	r registered off ice address here	ice address on our :	records, enter	the name of the nev
Name of New Registered Agent:	Antony	Friel	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	GOJO W	Enter Florida sire	Centre 1	Ac
	Rivervit	City		_
New Registered Agent's Signature, if changing Re	gictored Lague.			

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.

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

<u>Title</u>	Name	Address 6020 Winthrop Town Centre	Type of Action
MGRH	Antony Friel	Riverview FL 33578	 Add
			□ Remove
	Raviny Fans	(0030 Winthrop Town Centre Ave	Change
MORY	Raving Fans Restaurant Gasp ILC	6030 Winthrop Town Centre Are Riverview Fx 35578	Add
			Remove
			Change
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	<u></u>
Tective date, if other than the date of filing: In effective date is listed, the date must be specific and cannot be prior to date. If the date inserted in this block does not meet the applicable ocument's effective date on the Department of State's records.	(optional) ste of filing or more than 90 days after filing.) Pursuant to 605.020 statutory filing requirements, this date will not be listed a
record specifies a delayed effective date, but not ar The 90th day after the record is filed.	n effective time, at 12:01 a.m. on the earlier o
ned Margnber 14. 2018.	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00