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TALLAHASSEE, FLORIUM

T. CLINE

FEB 19 2008

EXAMINER

COVER LETTER

Division of Corp		
SUBJECT: Broadway	y Bar Holdings, LLC	
h	_	
	Amendment and fee(s) are submitted for filing. Idence concerning this matter to the following:	
	Jerome S. Levin	
	(Name of Person)	
	Levin Tannenbaum, P.L.	
	(Firm/Company)	
	1680 Fruitville Road, Suite 102	
	(Address)	
	Sarasota, FL 34236	TAL
	(City/State and Zip Code)	TARE TE T
For further information con	ncerning this matter, please call:	2000 FEB 18 PM 12: 42 SECRETARY OF STATE TALLAHASSEE, FLORID Imber
Linda Veautour	at (941) 308 3150 (Area Code & Daytime Telephone N	Fish is
(Name of	'Person) (Area Code & Daytime Telephone N	umber) and to
Enclosed is a check for the	e following amount:	
\$25,00 Filing Fee	Certificate of Status Certified Copy Cert (additional copy is enclosed)	0 Filing Fee, tificate of Status & tified Copy ditional 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

Broadway Bar Holdings, 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 April 28, 2004 and assigned Florida document number L0400034110 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Broadway Bar Sarasota, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." B. If amending the registered agent and/or registered office address on our records, enter_the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: (Enter Florida street address) (Zip Code) (City)

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = M MGRM.=	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
,			Add Remove
			Add Remove
D. If amer	nding any other information, enter change(s	s) here: (Attach additional sheets, if necessary,)	- 8 FM
		ORIDA	
Dated	,	 	_
	Signature of a member of CAROLYN HE Typed or	Acuth r authorized representative of a member	
	Typed or	printed name of signee	

Page 2 of 2

Filing Fee: \$25.00