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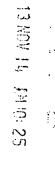
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

Prime Choice Restaurants, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Raquel Robinson

Name of Person

Byblos Development, Inc.

Firm/Company

7932 W. Sand Lake Road, Ste 102

Address

Orlando, FL 32819

City/State and Zip Code

rjebailey@ph-dev.com

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

For further information concerning this matter, please call:

Raquel Robinson

407,226-8888 x 106

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

■\$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

Prime Choice Restaurants, 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 Liab Florida document number L06000097590	ility Company 	were filed on 10/05/200	06	and a	ssigned
This amendment is submitted to amend the follow	ing:				
A. If amending name, enter the new name of the	ne limited liab	ility company here:			
The new name must be distinguishable and end with t "L.L.C."	he words "Limi	ted Liability Company," the	designation "L	LC" or the	abbreviation
Enter new principal offices address, if applicab	le:	7932 W. Sand Lake	Road		
(Principal office address MUST BE A STREET.	ADDRESS)	Suite 102	£3.5	· .	
		Orlando, FL 32819		<u> </u>	
Enter new mailing address, if applicable:		7932 W. Sand Lake	Road -	10 NOT	10 - 64 24 - 64
Adiling address MAY BE A POST OFFICE BOX)		Suite 102	:	1 100	
		Orlando, FL 32819		135	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered of e address here	fice address on our reco e:	ords, enterit	he name	of the nev
Name of New Registered Agent:	Joseph JeE	Bailey			
New Registered Office Address:	7932 W. Sa	and Lake Road, Suite	102		
		Enter Flori	da street add	ress	
	Orlando		, Florida <u>32</u>	819	
		City		Zip Co	de
New Registered Agent's Signature, if changing Reg	<u>sistered Agent:</u>				

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 Begistered Agent, Signature of New Registered Agent

Page 1 673

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address Type of Action
MGRM	Amjad Maali	7450 DR. PHILLIPS BLVD. SUITE # 304
		ORLANDO, FL 32819 Remove
MGRM	Joseph JeBailey	7932 W. Sand Lake Road ✓ Add
		Suite 102, Orlando, FL 32819
MGR	Raquel J. Robinson	7932 W. Sand Lake Road
		Suite 102, Orlando, FL 32819
MGR	A. Tom Harb	7932 W. Sand Lake Road
		Suite 102, Orlando, FL 32819 Remove
		Add
		Remove
		Add
		Remove

f amending any other informatio	on, enter change(s) here: (Attach additional sheets, if necessary.)
, ,	
Navanah an 44	0040
November 11	2013
	ture of a member of authorized representative of a member
Joseph JeBailey,	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00