## 107000053857

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## **Articles of Amendment** to **Articles of Organization** of

## MEET ME AT GRAZIE, 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 05/21/2007 and assigned Florida document number <u>L07000053857</u>

Coralee G. Penabad

1) MGR

A.	mendment is submitted to amend the  If amending name, enter the new i	J	mited liability compar	nv here:			
	The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."						
	Enter new principal offices address, if applicable:2100 Ponce De Leon Blvd.						
	(Principal office address <u>MUST BE A STREET ADDRESS</u> )		Suite 1045				
			Coral Gables, FL 331	34			
	Enter new mailing address, if app	licable:	2100 Ponce De Leon	Blvd.			
	(Mailing address MAY BE A POST OFFICE BOX)		Suite 1045				
			Coral Gables, FL 331	34			
B.	If amonding the registered agent	andlor register	rod office address on	our records enter			
В.	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:						
			<del></del>	2014 FALL			
	Name of New Registered Agent:	Sandra Navar	ro-Garcia	; <del>42.</del> 4			
	New Registered Office Address:	7951 SW 40 <sup>th</sup>	Street, Suite 202	ARA MARA			
	TVOW TROGISTORED CHINGS THAT CODE.	Miami, FL 33		<u> </u>			
Now F	Registered Agent's Signature if cha	naina Pagista	red Agent:				
I herei	by accept the appointment as register	red agent and a	igree to act in this capa	νυ, <u>Σν</u> «μαν			
to con	nply with the provisions of all statutes	relative to the p	proper and complete p	erformance of my			
duties,	, and I am familiar with and accept the	e obligations of	my position as registe	red agent as			
provia reaiste	led for in Chapter 605, F.S. Or, if this ered office address, I hereby confirm t	that the limited	sing nied merely reliect liability company has b	ca change in the been notified in			
	g of this change.	mat the immod	nability company mac a				
J							
	If Changing Registered	Agent, <u>Signature</u>	of New Registered Agent				
C.	If amending the Managers of Authorized Member on our records, enter the title, name,						
	address of each Manager or Auth	<u>orized Membe</u>	<u>r being added or rem</u>	oved from our			
	records:						
	= Manager R= Authorized Member						
<u>Tit</u>	tle <u>Name</u>	Addre	ss	Type of Action (Check One)			

235 Altara Avenue

Coral Gables, FL 33146

Add

Remove

<u>Ti</u> t	<u>le</u>	<u>Name</u>	Address	Type of Action (Check One)				
2)	MGR	Michael Calderon	2100 Ponce De Leon Blvd. Suite 1045 Coral Gables, FL 33134	<ul><li>✓ Add</li><li>☐ Remove</li></ul>				
D.	If amending any other information, enter change(s) here: (Attach additional sheet, if necessary). (Be specific)							
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 more than 90 days after filing.) (605.0207 (3)(b)							
Dated	<del></del>	14/344 1/////						
Signa	ture	Signature of/a member of author	ized representative of a member					
Michael Calderon								
		(Typed or printed	name of person signee)					

2014 JAN 30 PM 2: 41

JULY TARY OF STATE
TALLAHASSEE FLORIDA