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EXAMINER



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06/12/08--01006--002 **25.00

COVER LETTER

Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Divisior	of Corp	orations						
CI	DII 46	02.11.0						
SUBJECT: Of	SUBJECT: GRILL 192, LLC (Name of Limited Liability Company)							
(
								
The enclosed Art	The enclosed Articles of Amendment and fee(s) are submitted for filing.							
Please return all o	correspond	dence concerning this matter	to the following:					
			(Name of Person)					
		GRILL 192, LLC						
	(Firm/Company)							
		1212 FAST STRAWRRII	NGF AVF					
	1212 EAST STRAWBRIDGE AVE. (Address)							
		MELBOURNE, FL 21901	(City/State and Zip Code)	· · · · ·				
			(,					
For further inform	nation con	cerning this matter, please ca	all:					
PHILLIP ISAN (Name of Person)			at (321) 652-5057 (Area Code & Daytime T	elephone Number)				
	(,	(
Particulation des	.1. 61	6.11.						
		following amount:	□677 00 E''' E 8	Paco oo nu n				
☑ \$25.00 Filing	ree	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy	□\$60.00 Filing Fee, Certificate of Status &				
			(additional copy is enclosed)	Certified Copy (additional copy is enclosed)				
				(auamona cop) to encrossa,				
	:							
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327			STREET/COURIER	ADDRESS:				
		on Section of Corporations	Registration Section Division of Corporatio	ons				
			Clifton Building					

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GRILL 192, LLC					
(Name of the Limited Liability Compa (A Florida Limited I	iny as it now appears on our records.) Liability Company)				
The Articles of Organization for this Limited Liability Company Florida document number <u>L08000040377</u> .	were filed on April 22, 2007	_ and assi	gned		
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	oility company here:				
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the designation "LLC	C" or the at	obreviatio		
Enter new principal offices address, if applicable:	1212 EAST STRAWBRIDGE AVENUE				
(Principal office address MUST BE A STREET ADDRESS)	MELBOURNE, FL 21901	· ©			
		<u></u>	<u> </u>		
		E	2H		
Enter new mailing address, if applicable:	1212 EAST STRAWBRIDGE AVE.	12			
(Mailing address MAY BE A POST OFFICE BOX)	MELBOURNE, FL 21901	32	푛즉분		
		••	2.0		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		name of			
Name of New Registered Agent:					
New Registered Office Address:					
	(Enter Florida street address)				
	, Florida	,			
	(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 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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	GRILL 192 MANAGER, LLC	1212 EAST STRAWBRIDGE AVE. MELBOURNE, FL 21901	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter cha	nge(s) here: (Attach additional sheets, if necessary	·.)
——————————————————————————————————————	20	0	
Dated MAY	Best Lole Signature of a member	ber or authorized representative of a member	
	Beet R.O	LIVER ed or printed name of signee	·

Page 2 of 2

Filing Fee: \$25.00