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10/01/08--01033--004 **25

TALLAHASSEE, FLORIDA

COVER LETTER

SUBJECT: PAPA HI	UGHIE'S ISLAMORADA	LLC	
	(Name of Lim	ited Liability Company)	
	•		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Andrew L. Mann, Esq.		
		(Name of Person)	
	Mann & Wolf, LLP		
		(Firm/Company)	
	4300 N. University Drive,	Suite C-203	
		(Address)	,
	•		
	Sunrise, FL 33351		
		(City/State and Zip Code)	
For further information of	concerning this matter, please c	all:	
Andrew L. Mann, Esq.		at (954) 572-9944	
(Name of Person) at (934) 372-9944 (Area Code & Daytime Telephone Number		elephone Number)	
Enclosed is a check for t	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:

TO:

Registration Section
Division of Corporations

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

FILED

2008 OCT - 1 PM 1: 19

SEUNETARY U. STATE TALLAHASS F. FLORIDA

PAPA HUGHIE'S ISLAMORADA 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 9/24/08	and assigned
Florida document number <u>L.08000091328</u>	G	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and end with the w"L.L.C."	ords "Limited Liability Company," the do	esignation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	ORESS)	
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg		ds, enter the name of the new
registered agent and/or the new registered office ad	turess nere:	
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Florid	da 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 **Title Address** Type of Action Name MGR **Hugh Ganter** 4602 N. Federal Highway Add 🗖 Remove Lighthouse Point, FL 33064 **∫** Add ☐ Remove Remove □ Add Remove ┌ Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Please change Jerry O. Johnson's title of "Manager" to "Managing Member". Dated September 29 2008 Signature of a member or authorized representative of a member Andrew L. Mann, Esq.

Typed or printed name of signee

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Filing Fee: \$25.00