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SECRETARY OF STATE SHIT ANASSEE, FLORIO

J. BRYAN

SEP - 4 2009

EXAMINER

COVER LETTER

10:	Division of Corp				•
SUBJEC	CT:	FIRST CUT BRA	ZILIAN STEAKHOUSE		
50202		Name of Limi	ted Liability Company		
The encl	losed Articles of	Amendment and fee(s) are sub	omitted for filing.		5 S S
Please re	eturn all correspon	ndence concerning this matter	to the following:		OSEP-3 MIN:50 SECRETARY OF STATE SECRETARY OF FLORIC
		В	RUNO DONCHE-GAY		SSEE.
			Name of Person		£1.5
FIRST CI			T BRAZILIAN STEAKHOUS	E	Part 6
			Firm/Company		7
			1481 Main Street		
			Address		
			Sarasota/FL 34236		
			City/State and Zip Code		
		Cynt E-mail address: (1	hia@hotel-avignon.com to be used for future annual report notifice	ntion)	
For furth	ner information co	oncerning this matter, please c	all:		
		DONCHE-GAY		73-2863	
	Name of	Person	Area Code & Daytime	Telephone Number	
Enclosed	is a check for th	e following amount:			
\$25.0	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &
		NG ADDRESS: ttion Section	STREET/COURIE Registration Section	R ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FIRST CUT BRAZILIAN STEAKHOUSE

(Name of the Limited L (A F	iability Compar lorida Limited L	y as it now appear iability Company)	s on our records.)	***************************************
The Articles of Organization for this Limited Liab	oility Company	were filed on	09/25/2008	and assigned
Florida document numberL080000914	37			_
This amendment is submitted to amend the follow A. If amending name, enter the new name of the	ving:	lity company her	<u>e</u> :	SECRETARY OF STALLARY OF STALL
The new name must be distinguishable and end with to "L.L.C."	the words "Limit	ed Liability Compa	ny," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicab	le:	1481 Main St	reet	
(Principal office address MUST BE A STREET	ADDRESS)	Sarasota/FL 3	34236	
Enter new mailing address, if applicable:		1481 Main Str	reet	
(Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>	Sarasota/FL 3	34236	
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent: New Registered Office Address:	ce address here			the name of the new
		Ent	er Florida street ac	dress
	BR	ADENTON	, Florida _	34210
		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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

	= Manager ∕I = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
- 12-14			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
	_		Add Remove
D. If a	mending any other information, enter change		essary.)
	DONCHE-GAY BRUNO R		
	3603 45TH TERRACE WEST # 103		·
	BRADENTON/FL 34210		09 SEP
Dated _	31/08/2009	· ·	-3 AHI ARY OF S
		or authorized representative of a member	AHII: 50 OF STATE E. FLORIDA
	Typed o	IO DONCHE-GAY or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00