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D. SCOTT MAY 1 - 2017

COVER LETTER

	Registration Se Division of Cor				
SUBJEC		GRILL LLC			
		Name of Lim	ited Liability Company		
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please ret	urn all correspo	ondence concerning this matter	to the following:		
		MARCELO FERREIROS			
BAIRES GRILL LLC					
Firm/Company					
1116 LINCOLN ROAD					
			Address		
		4.			
		E-mail address: (to be used for future annual report notif	cation)	
For furthe	er information c	oncerning this matter, please ca	all:		
MARCELO FERREIROS		os .	305 992-1441	7.00	#
	Name o	f Person	Area Code Daytime	Telephone Number	FILE PR 27
Enclosed	is a check for th	he following amount:			
□ \$25.0	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of State Certified Copy (additional copy is en	ūs & w

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

	BAIRES	GRILL LLC		
(<u>Name of the Limited</u> (/	Liability Compa	i ny as it now appeai Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Lial Florida document numberL09000021277 This amendment is submitted to amend the follow	bility Company		03/03/2009	and assigned
A. If amending name, enter the new name of t	he limited liab	ility company he	ere:	
The new name must be distinguishable and contain the wor	ds "Limited Liabi	lity Company," the d	esignation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applical	ole:	1116 LINCOLN ROAD		
(Principal office address MUST BE A STREET	ADDRESS)	MIAMI BEACH, FL 33139		
Enter new mailing address, if applicable:		1116 LINCOLN	I ROAD	
(Mailing address MAY BE A POST OFFICE BOX)		MIAMI BEACE	H, FL 33139	
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:		<u>e</u> :	our records, <u>ent</u>	er the name of the nev
Navy Pagistanad Office Address	4700 BISCAY!	NE BLVD SUIT	E 400	100
New Registered Office Address:			ida street address	
	MIAMI		, Florida	33137 7 1
		City		Zip Code
New Registered Agent's Signature, if changing Re	gistered Agent:			5 5
I hereby accept the appointment as registered	agent and agr	ee to act in this c	capacity. I further	agree to comply with the

If Changing Registered Agent, Signature of New Registered Agent

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 605, 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	BAIRES HOLDINGS LLC	18090 COLLINS AVE T1-3	≅ Add
		SUNNY ISLES, FL 33160	□ Remove
			Change
MGR	FRATOLA LLC	2110 KEYSTONE BLVD	B Add
		NORTH MIAMI, FL 33181	Remove
			Change
			Add
			☐ Remove
			Change
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	tion, enter change(s) here: (Atta		,,,,	
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ffective date, if other than the	date of filing:	(on	tional)	
an effective date is listed, the date mus lote: If the date inserted in this bloocument's effective date on the De	date of filing: t be specific and cannot be prior to date o ock does not meet the applicable state partment of State's records.	filing or more than 90 days af utory filing requirements, t	ter filing.) Pursuant this date will not be	to 605.0207 e listed as
e record specifies a delayed The 90th day after the rec	l effective date, but not an ef ord is filed.	fective time, at 12:01	a.m. on the ϵ	earlier o
APRIL 20TH	2017	A	528	第二
ated	4000000000			R 27 A
	Signature of a member or authorized rep	resentative of a member		
				₽

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Typed or printed name of signee

Filing Fee: \$25.00