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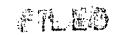
JUN 2 1 2011 EXAMINER

## COVER LETTER

TO: Registration Section

🐃 . Division of	Corporations				
SUBJECT:	300 Rest	aurant Group LLC			
SUBULE1:		nited Liability Company	<del></del>		
The enclosed Articles	s of Amendment and fee(s) are su	abmitted for filing.			
Please return all corre	espondence concerning this matte	er to the following:			
	Jos	Joseph N. Perlman, Esquire			
		Name of Person			
	Firm/Company				
	110	1101 Belcher Road S., Ste. B			
		Largo, FL 33771			
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·		
For further information	E-mail address: on concerning this matter, please	(to be used for future annual report notification call:	n)		
	N. Perlman, Esquire	at ( 727 ) 536	-2711		
	ne of Person	Area Code & Daytime Tele			
Enclosed is a check fo	or 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)		
Reg Div P.O	ILING ADDRESS: istration Section ision of Corporations . Box 6327 ahassee, FL 32314	STREET/COURIER A Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301			

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



26 H H 02 NJL 1142

30	00 Restaurant Group LLC	ALU ALU	MASSEE, FLORIDA
( <u>Name of the Limited</u> (A	Liability Company as it now appea A Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited L Florida document numberL10000069		June 29, 2010	and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liability company he	<u>re</u> :	
The new name must be distinguishable and end win "L.L.C."	th the words "Limited Liability Comp	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applic	eable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
B. If amending the registered agent and/or the new registered of		our records, <u>enter tl</u>	he name of the new
Name of New Registered Agent:			
New Registered Office Address:	En	ter Florida street addr	ress
	, 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>	Name	Address	Type of Action
MGRM	Barbara West	690 Island way	_☑ Add _☐ Remove
MGR_	Anthony Mouhourtis JR	1352 J& SY SYN Clearwater 37760	Add Remove
<u>s</u>	Anthony Mouhourtis JR		Add _☑ Remove
			Add Remove
			Add Remove
			Add Remove
D. If amending	gany other information, enter change(s)	here: (Attach additional sheets, if necessary.)	_
			-
	•	A A	2011 JUN 20
Dated	,	Ë	20 11 5
		authorized representative of a member	50
		rbara West rinted name of signee	<del></del>

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Filing Fee: \$25.00