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SECRETARY OF STATE

## **COVER LETTER**

TO: Registration So Division of Cor					
SUBJECT:		lexican Restaurant, LLC			
	Name of Limi	ted Liability Company			
	Amendment and fee(s) are sub ondence concerning this matter	-			
		Rory B. Weiner			
		Name of Person	· · · · · · · · · · · · · · · · · · ·		
	1	Rory B. Weiner, P.A.			
Firm/Company				<b>7</b>	
		972,			
		Address		ZH2 JUL -9 PH 48 25 SECTICTARY OF STATE ALLAHASSEE, FLORIDA	
		Brandon, FL 33511		SEE SEE	LED
	•	City/State and Zip Code		FS	با 11
	E-mail address: (	einer@roryweiner.com to be used for future annual report notific	ation)	M 4 26 STATE FLORIDA	(m, m, )
For further information of	concerning this matter, please of	eall:		.i> G1	
Ro	ory B. Weiner	at ( 813 ) 6	81-3300		
	of Person	at ( <u>813</u> ) 6 Area Code & Daytime	Telephone Number		
Enclosed is a check for t	he following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Cértified Copy (additional copy is enclosed)	Certified C	of Status &	d)

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

El Taco Bueno Mexican Restaurant, LLC							
( <u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears or ida Limited Liability Company)	on our records.)					
`	, , , , , , , , , , , , , , , , , , , ,						
The Articles of Organization for this Limited Liabi	lity Company were filed on	10/12/2010	and assigned				
Florida document numberL1000010642	<u>0                                    </u>						
This amendment is submitted to amend the following	ng:						
A. If amending name, enter the new name of the	e limited liability company here	:					
Тасо	Rey Mexican Grill, LLC						
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Compan	y," the designation "	LLC" or the abbreviation				
Enter new principal offices address, if applicable	e:	· · · · · · · · · · · · · · · · · · ·					
(Principal office address MUST BE A STREET A	DDRESS)		<u>L</u> SS <b>S</b>				
			新台子				
			SA				
Enter new mailing address, if applicable:							
(Mailing address MAY BE A POST OFFICE BO	<u></u>		<b>E</b> * O				
P If amanding the registered agent and/or	rogistored office address on a	um macanda antan	the name of the new				
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:							
Name of New Registered Agent:							
Name of New Registered Agent.	<del> </del>	<u> </u>	<del></del>				
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 = Ma MGRM = 1	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
	•		□ Damous
			AH AH
			VA 7 Remove P
		<del> </del>	<u>Ori</u> Minove
D. If amen	nding any other information	, enter change(s) here: (Attach additional sheets	s, if necessary.)
_			<del> </del>
_			
-			
Dated	June 28	2012	
	Stand	te of a member or authorized representative of a mem	her
		Rory B. Weiner Typed or printed name of signee	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00