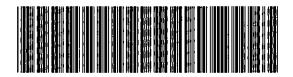
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10 DEC -7 PH 12: 58

T. HAMPTON

DEC - 8 2010

EXAMNER

COVER LETTER

TO: Registration Division of C					
SUBJECT:	Chicken No	w at Aventura, LLC			
	Name of Lim	ited Liability Company			
The enclosed Articles	of Amendment and fee(s) are sul	omitted for filing.			
Please return all corres	pondence concerning this matter	r to the following:			
		Agnes Chau			
		Name of Person			
	Law O	Law Offices of Agnes Chau, P.A.			
	· · · · · · · · · · · · · · · · · ·	Firm/Company			
716 E. Colonial Drive					
		Address			
Orlando, FL 32803					
		City/State and Zip Code			
	amc(@agneschaulawfirm.com to be used for future annual report notifi	cotion\		
For further information	o concerning this matter, please of		cation)		
	Agnes Chau	at (407) Area Code & Daytime	648-0880		
T California de la Cali	o of the son	Alea Code de Dayume	A Companie (Value)		
Enclosed is a check for	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)		
Regi	LING ADDRESS: stration Section sion of Corporations	STREET/COURING Registration Section Division of Corpora	n		

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

SECRETARY OF STATE DIVISION OF CORPORATIONS

10 DEC -7 PH 12: 58

Chicken	Now at Aventura, LL	.C	
(<u>Name of the Limited Liabi</u> (A Florid	lity Company as it now appea da Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability	Company were filed on	12/3/2010	and assigned
Florida document number L10000124495	·		
This amendment is submitted to amend the following:	:		
A. If amending name, enter the new name of the li	mited liability company her	<u>'e</u> :	
The new name must be distinguishable and end with the v "L.L.C."	words "Limited Liability Compa	my," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applicable:	***************************************		
(Principal office address MUST BE A STREET AD)	DRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or reg	gistered office address on o	our records, <u>enter t</u>	he name of the new
registered agent and/or the new registered ornee ac	idress nere:		
Name of New Registered Agent:			
New Registered Office Address:	r	Fil: J	
	Enter Florida street address		
	City	, Florida	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 <u>Name</u> Address **Type of Action** MGRM Andrew Shen 12804 W. Sunrise Blvd, #869 Sunrise, FL 33323 ✓ Add Remove MGRM Edward Shen 12804 W. Sunrise Blvd, #869 ✓ Add Remove Sunrise, FL 33323 **MGRM** Anli Shen 12804 W. Sunrise Blvd. #869 ✓ Add Sunrise, FL 33323 Remove ☐ Add Remove □Add Remove ☐Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) December 3 2010 Dated Signature of a member or authorized representative of a member Agnes Chau

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00