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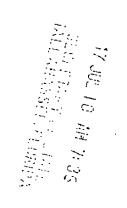
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COVER LETTER

	Registration Se Division of Cor			
e110 1127		nd Restaurant LLC		
SUBJEC	- L :	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		Sofia Mylona		
			Name of Person	
		Thasos Island Restaurant I	J.C	
			Firm/Company	
		1525 N FT LAUDERDAL	E BEACH BLVD	
			Address	-
		Fort Lauderdale, FL 33304		
		-	City/State and Zip Code	
		500h.a E-man address: (1	mylona @ gmail.	com ation)
For furth	er information c	oncerning this matter, please cr	nll:	
Sofia My	ylona		954 at () 294 –	.2984
	Name o	l'Person	at () <u>294 -</u> Area Code Daytime	Felephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed:	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 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

Thasos Island Restaurant LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on and assigned Florida document number 1.10000126511 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enfer the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida

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 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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Gus Leontarakis	1525 N Ft. Lauderdale Beh Blvd.	□ Add
		Ft. Lauderdale, FL 33304	■ Remove
			□ Change
MGR	Sotia Mylona	1525 N Ft. Lauderdale Beh Blvd.	= Add
		Ft. Lauderdale, FL 33304	
			Change
			Add
			Remove
			☐ Change
			□ Remove
			Change
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ecti	re date, if other than the date of filing: (optional)
i cili	(optional) citive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.01 fithe data inspected in this block does not exact the applicable statutors (filing requirements this data will not be 10 at 20.00).
	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be fisted nt's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier
rec	90th day after the record is filed.
rec he	
he	
he	7-3.17
he	<u>7-3.17</u>
he	7-3.17 Mal/Jul Signature of a member or authorized representative of a member

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Filing Fee: \$25.00