

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone

: (561)694-8107

Fax Number

: (561)694-1639

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TLJUANA FLATS #167, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

8/28/15, 2:29 PM

08/28/2015 13:59

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TIJUANA FLATS #167, LLC		
(V	Florida Limited Liability Company)	ur records.)
	ility Company were filed on 04/08/20	and assigned
Florida document number L11000042198		
This amendment is submitted to amend the follow	ing:	
is amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." ter new principal offices address, if applicable: incipal office address MUST BE A STREET ADDRESS)		
The new name must be distinguishable and contain the word	is "Limited Liability Company," the designa-	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET)	ADDRESS)	
	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BC	280	
		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	B., et	
	Enter Florida str	eer paaress
	City	, Florida Zin Code
	7	

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

08/28/2015 13:59 5616941639

u 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>	Address	Type of Action
MGR	TIJUANA FLATS RESTAURANTS, LLC	9439 FOREST CITY ROAD STE 1000	
		ALTAMONTE SPRINGS, FL 32714	
			□ Remove
			Change
MGR	TJF MANAGEMENT COMPANY, LLC	9439 FOREST CITY ROAD STE 1000 ALTAMONTE SPRINGS, FL 32714	
			≅ Remove
			Change
			☐ Remove
			Change
			Add
			□ Remove
			Change
			Remove
			Change
·			□ Add
			□ Remove
			Change

a/28/2015 13:59 5616941639	PAGE	04/
1/28/2015 13:59 5616941639 If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
	<u> </u>	
		
		
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Essenting data if other their the date of filing: (optional)		
Effective date, if other than the date of filing: (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuit of the date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuit of the date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)	want to 605.	,0207 (3
Nate: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will a document's effective date on the Department of State's records.	NOT OG 11916	,u as 111
document 3 extensive date on the 2-sp-t massive of 5 to 5		
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on t	he earlie	er of:
The 90th day after the record is filed.		
Dated August 28th 2015		
a full fall		
Signature of a member or authorized representative of a member		
Taylor Page, Attorney-in-fact		
Typed or printed name of signee		

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Filing Fee: \$25.00