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## COVER LETTER

	Registration Se Division of Cor			
	Legacy Q	SR H New Tampa LLC		
SUBJEC	T:	Name of Lim	ited Liability Company	
		•		
The enclo	sed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please ret	urn all correspo	ndence concerning this matter	to the following:	
		Linda Citara		
			Name of Person	
		Thomas Colitsas & Associ	ates, P.A.	
			Firm/Company	
		103 Carnegie Center, Suite	: 309	
			Address	
		Princeton, NJ 08540	,	
			City/State and Zip Code	
		louic@legacyqsr.com		
For further	er information c	E-mail address: () oncerning this matter, please or	to be used for future annual report no all:	otification)
Linda Ci	tara		609 452-0889	:
	Name o	f Person		ime Telephone Number
Enclosed	is a check for the	ne following amount:		
\$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
		ING ADDRESS:		RIER ADDRESS:
		ration Section on of Corporations	Registration Sec Division of Corp	
	P.O. B	ox 6327	Clifton Building	
	Tallaha	assee, FL 32314	2661 Executive Tallahassee, FL	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ZOIGMAY-2 PM 1:38
SECRETARY OF STATE

Legacy QSR H New Tampa 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 March 28, 2012 and assigned Fiorida document number L12000043043 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." 10755 Starkey Rd Enter new principal offices address, if applicable: Largo, FL 33710 (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, enter the name of 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 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

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

MGR = M	lanager uthorized Member	·		
Title	Name	Address		Type of Action
MGR	Rod Valencia		·	
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	•	Forest Hills, NY 11	1375	■ Remove
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Legacy Florid	la Holding, EIN# 47-537547	, a holding company.			
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effective date is li	other than the date of filir isted, the date must be specific ar	nd cannot be prior to date of			g.) Pursuant to 605.020
	serted in this block does not we date on the Department of		tory filing requi	rements, this dat	te will not be listed as
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	les a delayed effective after the record is filed		ective time,	at 12:01 a.m	. on the earlier o
ed APR	WL 23	, <u>2016</u> . 1 1			
	Signature of a	a member or authorized rep	resentative of a m	ember	
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Filing Fee: \$25.00