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K.SALY EXAMINER JAN 16 2013

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT

Global Restaurant Concepts, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Luca Delogu

Name of Person

Firm/Company

6725 SW 51st Street

Address

Miami, FL 33155

City/State and Zip Code

lucadelogu@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luca Delogu

,,,954**,305-362**9

Name of Person

Area Code & Daytime Telephone Number

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)

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

FILED 13 JAN 14 PM 2:51

Giobai nestaurant Concepts, L		records.)
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our a Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability Florida document number L12000072576	Company were filed on 05/31/20	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	ORESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	istered office address on our reco <u>dress here</u> :	ords, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flori	da 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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

Title MGRM	Name Ferruccio Cosenza	Address 6725 SW 51st Street Miami, FL 33155	Type of Action Add Remove
			Add Remove

f amending any other informa	tion, enter change(s) here: (Attach additional sheets, if necessary.)
•	
January 2	2013
9	· · · · · · · · · · · · · · · · · · ·
Sig	nature of a member or authorized representative of a member
Luca Delogu	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00