Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name

: CORPORATE CREATIONS INTERNATION

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? annual report mailings. Enter only one email address please :

	Email	Address:
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **TIJUANA FLATS #178 LLC**

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TIJUANA FLATS #178 LLC		
(Name of the Limited Liability (A Florida Li	Company as it now appears on our mited Liability Company)	records.)
The Articles of Organization for this Limited Liability Con Florida document number <u>L12000101049</u>	npany were filed on 08/06/2012	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d 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 ADDRES	the following: name of the limited liability company here: ain the words "Limited Liability Company," the designation "LUC" or the abbreviation "LUC" f applicable: STREET ADDRESS) ble: FFICE BOX) ort and/or registered office address on our records, enter the name of the new tered office address here:	
Enter new mailing address, if applicable:		EC PEC
Mailing address MAX BE A POST OFFICE BOX)		(n)>
TO MITTING HOLD TO SEE THE SEE		E C
B. If amending the registered agent and/or register- registered agent and/or the new registered office address		무금 오
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	address
		. Florida
	City	

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, Stenature of New Registered Agent

If 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>	Name	Address	Type of Action
MGR	TIJUANA FLATS RESTAURANTS, LLC	9439 FOREST CITY RD SUITE 1000	Add
		ALTAMONTE SPRINGS, FL 32714	□ Remove
			□ Change
MGR	TJF MANAGEMENT COMPANY, LLC	9439 FOREST CITY RD SUITE 1000	D Add
		ALTAMONTE SPRINGS, FL 32714	Remove
			Change
			D Add
	·		□ Remove
			Change ALL SEC
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			□ Remove
			Change
			Remove
			Change

Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days Note: If the date inserted in this block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records. the record specifies a delayed effective date, but not an effective time, at 12: The 90th day after the record is filed.		
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	1 a.m. on the earlie	ır of:
Dated August 28 , 2015	•	
Signature of a member or shihorized representative of a member		

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Filing Fee: \$25.00