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Registration Section

TO:

| Div | ision of Cor | porations | | |
|----------------|---|--|-------------------------|--|
| | Churrasco | Grill LLC | | |
| SUBJECT: | | Name of Lim | ited Liability Company | . |
| | | | | |
| The enclosed | me enclosed Articles of Amendment and fee(s) are submitted for filing. ease return all correspondence concerning this matter to the following: Maria A. Ipes Name of Person Churrasco Grill LLC | | | |
| Please return | all correspo | ndence concerning this matter | to the following: | |
| | | Maria A. Ipes | | |
| | | | Name of Person | |
| | | Churrasco Grill LLC | | |
| | | ·· | Firm/Company | |
| | | 4183 74th Place North | | |
| | | | Address | - |
| | | West Palm BEach FI, 33 | 3404 | |
| | | | City/State and Zip Code | |
| | | Churrascogrillfl@gmail.co | | for filing. Firm/Company Address State and Zip Code ed for future annual report notification) 561 2327801 at (|
| Eor further in | formation o | oncerning this matter, please c | | anceron) |
| | | oncerning uns matter, please c | | |
| Maria A. Ipe | | | | |
| | Name o | f Person | Arca Code Daytir | me Telephone Number |
| Enclosed is a | check for th | ne following amount: | | |
| □ \$25.00 F | iling Fee | ■ \$30.00 Filing Fee & Certificate of Status | | Certificate of Status & Certified Copy |
| | ling Addres | | | ection |
| Div | ision of C | orporations | Division of Co | orporations |
| |). Box 632 lahassee, F | | | Tallahassee oe Street, Suite 810 |
| 1 41 | , I | | 2413 N. MONU | or ancer anne 010 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Marke Co Pariso

Churrasco Grill LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

| | were filed on October 25, 2012 | and assigned |
|--|---|---------------------------|
| Florida document number L12000136122 | | 4 , - |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liab | ility company here: | |
| The new name must be distinguishable and contain the words "Limited Liabil | lity Company," the designation "LLC" or the | abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 4183 74th Place North | |
| (Principal office address MUST BE A STREET ADDRESS) | West Palm Beach FI, 33404 | |
| | | |
| Enter new mailing address, if applicable: | 4183 74th Place North | |
| (Mailing address MAY BE A POST OFFICE BOX) | West Palm Beach FI, 33404 | |
| B. If amending the registered agent and/or registered office of | address on our manuals auto-the | |
| B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent: | eddress on our records, <u>enter the n</u> | ame of the new registerer |
| agent and/or the new registered office address here: | eddress on our records, <u>enter the n</u> | ame of the new registered |
| Name of New Registered Agent: | eddress on our records, enter the n | ame of the new registered |
| Name of New Registered Agent: | Enter Florida street oddress , Florida | |
| Name of New Registered Agent: | F.nter Florida street address | |

If Changing Registered Agent, Signature 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> | <u>Name</u> | Address | Type of Action |
|--------------|----------------|---------------------------|------------------------|
| MGR | Carlos D. tpes | 4183 74th Place North | \(\exists\) Add |
| | | West Palm Beach FL. 33404 | □Remove |
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| ective date, if o | ther than the date of fi | ding: | | (optional) | |
| effective date is lis | sted, the date must be specific serted in this block does n | and cannot be prior to | date of filing or more the statutory filing rec | han 90 days after filing.) i | Pursuant to 605.020 |
| ument's effective | e date on the Department | of State's records. | or seminary managers. | , | iii iiot oo iisaa t |
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| cord specifies a c i filed. | lelayed effective date, but | not an effective time | e, at 12:01 a.m. on th | ne earlier of: (b) The | 90th day after the |
| | | | | | |
| March 9th | \cap | 2020 | _ | | |
| | A se a ah | T) ₀ | • | | |
| | · Mulle | 40- | | | |
| | Signature p | of a member or authoriz | zou representative of a | member | |
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Filing Fee: \$25.00