

L1300005224
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
TSUNAMI SUBS LLC**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DIVISION OF CORPORATIONS

16 NOV 30 AM 8:31

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Electronic Filing Menu

Corporate Filing Menu

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DEC 01 2016

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

(((H16000293317 3)))

TSUNAMI SUBS 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 01/10/2013 and assigned
Florida document number L13000005224

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."

Enter new principal offices address, if applicable:

(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:

TOMMY CARACCIA

New Registered Office Address:

109 S. STATE ROAD 7

Enter Florida street address

ROYAL PALM BEACH

City

Florida 33414

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 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

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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

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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	SCOTT HERMAN	109 S. STATE ROAD 7	<input type="checkbox"/> Add
		ROYAL PALM BEACH, FL 33414	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	TOMMY CARACCIA	109 S. STATE ROAD 7	<input checked="" type="checkbox"/> Add
		ROYAL PALM BEACH, FL 33414	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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DIVISION OF REVENUE

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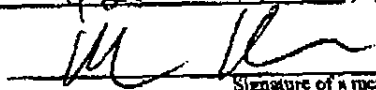
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) (((H16000293317 3)))

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DIVISION OF CORPORATE OPERATIONS

E. 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.) Pursuant to 603.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated 11/28, 2016.



Signature of a member or authorized representative of a member

Michael L Knapp

Type or printed name of signer