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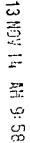


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COVER LETTER

TO:

Registration Section
Division of Corporations

MAILING ADDRESS:

Division of Corporations

Tallahassee, FL 32314

Registration Section

P.O. Box 6327

SUBJECT: Chicker and gill 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:
Rushud Vailey Name offerson
Chicago Chicken and grill Firm/Company
Mass 1325 W Thorpe St 18t U32
Tallerhusee FL 32303 City/State and Zip Code
Chicago chicago and will Suchoo. com Email address: (to be used for funde annual report politication)
For further information concerning this matter, please call:
Ruskoad Butter at 773 USS 4553 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

STREET/COURIER ADDRESS:

Registration Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Chicago Chicker	and grill L	Li	
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as w now appears on nited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Cor Florida document number <u>し130009244と</u>	npany were filed on <u>6.5</u> }	7.13 and ass	signed
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company here:		
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Company,"	the designation "LLC" or the	abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	<u> </u>		
Enter new mailing address, if applicable:		SSOR	S NOV
(Mailing address MAY BE A POST OFFICE BOX)		N	F 17124
B. If amending the registered agent and/or registered agent and/or the new registered office addre		records, enter the name	of the hew
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	City	, Florida Zip Coo	
		-	

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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

V

MGR = Manager

MGRM = Managing Member Type of Action **Title** Address Name MGKM Villie BTyson Remove Add Remove Remove Remove

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
Dated	[1] [4] [3]
	Monto
	Signature of a member or authorized representative of a member
	Rashad Baylow
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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