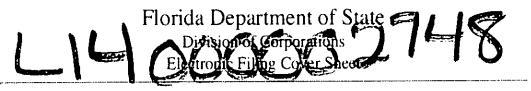
Division of Corporations



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 INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 : (561)214-8442 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:		 	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **BGM PEMBROKE PINES, LLC**

Certificate of Status	0
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Help

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BGM Pembroke Pines, LLC		
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compar	ny were filed on 01/07/2014	and assigned
Florida document number L14000002748	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lis	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	ibility Company," the designation "LLC" or the a	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 offic	e address on our records, <u>enter the na</u>	me of the new registere
agent and/or the new registered office address here:		2022 HA
Name of New Registered Agent:		78 1 3
New Registered Office Address:	Enter Florida street address	9 CX
	, Florida	မ
	City	Zip Codss - O
New Registered Agent's Signature, if changing Registered Agent	<u>nt:</u>	

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 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	BurgerFi Restaurant Management LLC	200 West Cypress Creek Rd, Suite 220	■Add
		Ft. Lauderdale, FL 33309	□Remove
			□Change
MGR	BurgerFi International, LLC	200 West Cypress Creek Rd, Suite 220	🖸 Add
		Ft. Lauderdale, FL 33309	Remove
			Change
Authorized Representative	Buines, Ian	200 West Cypress Creek Rd, Suite 220	🗆 Add
		Ft. Lauderdale, FL 33309	≣ Remove
			□Сһалдс
Authorized Representative	Renna, Patrick	200 West Cypress Creek Rd, Suite 220	□Add
		Ft. Lauderdale, FL 33309	🗏 Remove
			☐ Change
Authorized Representative	Schnopp, Stefan	200 West Cypress Creek Rd, Suite 220	[] Add
		Ft. Lauderdale, FL 33309	Remove
			Change
Authorized Representative	Rabinovitch, Michael	200 West Cypress Creek Rd, Suite 220	□Add
		Ft. Lauderdale, FL 33309	■Remove
			☐ Change

If amending Authorized Person(s) authorized to manage, enter the fitle, 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
Authorized Representative	Zavolta, Michelle	200 West Cypress Creek Rd, Suite 220	□Add
		Ft. Lauderdale, FL 33309	Remove
			Change
Authorized Representative	Biskin, Ron	200 West Cypress Creek Rd, Suite 220	🗀 Add
		Ft. Lauderdale, FL 33309	Remove
			□Change
			□Add
			Remove
		·	☐ Change
			□ Add
			Remove
			Change
			□Remove
			□Change
			□Add
			□ Remove
			□ Change

document's effective date on the Department of State's records. e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day at rd is filed. Dated May 9	an the date of filing:	
Effective date, if other than the date of filing: [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 6 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed under the effective date on the Department of State's records. The effective date on the Department of State's records. The effective date on the department of State's records. The spoth day at dis filed. Dated May 9 [2022] Which William State of State's records.	an the date of filing:	
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Filing Fee: \$25.00