Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : THE LAW OFFICES OF NICK SPRADEIN

Account Number : I20070000020

Phone : (813) 435-3176

Fax Number

: (713)429~1276

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

	Address:			
K:17124 1 I	ACCTERS:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BOARDWALK BROTHERS RESTAURANTS LLC

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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BOARDWALK BROTHERS RESTAURA		our records.)			
(A Flori	ility Company as it now appears of da Limited Liability Company)				
The Articles of Organization for this Limited Liability	Company were filed on 07/24	/2014		and ass	igned
Florida document number L14000116652					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the liv	mited liability company here	:			
The new name must be distinguishable and contain the words "Li	imited Liability Company," the desig	gnation "LLC" o	or the abbrev	lation "L.	ī.c."
Enter new principal offices address, if applicable:				·· 	
(Principal office address MUST BE A STREET ADD	ORESS)				
		····	-		
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)				<u> </u>	
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B. If amending the registered agent and/or reg	istered office address on o	ur records,	enter the		of the 1
registered agent and/or the new registered office ad	<u>ldress here</u> :			A	
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Name of New Registered Agent:	*		- 55. -	-3 -	
New Registered Office Address:					
The second secon	Enter Florida	street address			······································
		, Flori			
	City			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

01/12/2018 23:50

#1318 P. 003/004
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

Title	Name	Address	Type of Action
mgr	RADCLIFFE, STEVEN	138 NEW MEXICO LN	
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ective date, if other than the official date is listed, the date in	ust he specific an	d cannot be prior	to date of filing o	r more than 90 days	optional) after filing.) Pursu	ant to 6	05.020
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record specifies a delaye he 90th day after the re	ed effective (cord is filed.	date, but no	t an effective	e time, at 12:0	31 a.m. on th	e ear	lier c
eded		2015					
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Typed or printed name of signee