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(Re	questor's Name)	-
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(City	y/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

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	gistration Se rision of Cor				
SUBJECT.		LORNAS CARIBBEAN AND AMERICAN GRILL, LLC.			
SUBJECT:	-		ited Liability Company		
The enclosed	d Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		ROLANDO E. LEIVA CI	² A		
			Name of Person		
		ROLANDO E. LEIVA CI	PA PA		
		Firm/Company			
		7400 SW 50TH TERRAC	E SUITE 302		
		Address			
		MIAMI, FL 33155			
			City/State and Zip Code		
		MAURICIO@LEIVACPA			
		E-mail address: (to be used for lature annual report north	ication)	
For further in	nformation c	oncerning this matter, please c	all:		
ROLANDO	LEIVA		305 663-1511		
	Name o	f Person	at () Area Code Daytime	Telephone Number	
Enclosed is a	i check for th	ne following amount:			
□ \$25.00 F	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	

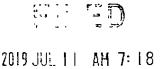
MAILING ADDRESS: Registration Section Division of Corporations

D () Day 6337

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clinon Building

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



LORNAS CARIBBEAN AND AMERICAN GRILL, LLC.

(Name of the Limited Liability Company as it now appears on our records, 12) Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{08/25/2016}{}$ _____ and assigned Florida document number $\frac{1.16000159665}{}$ 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 "LLC." same Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) same Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON) 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: same Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

_. Florida _

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
AMBR	RUTH C BODIE	19752 NW 27TH AVE	
		MIAMI GARDENS, FL 33056	■ Remove
			□ Change
AMBR	PRESIDENTIAL CORNER LLC	2100 NW 90 STREET	Add
		MIRAMAR, FL 33027	Remove
			☐ Change
AMBR	MATARLA, BODIE	3182 SW 139TH AVE	≡ Add
		MIRAMAR, FL 33027	□ Remove
			☐ Change
AMBR	LORNA C. WESTMORELAND	3182 SW 139TH AVENUE	= Add
		MIRAMAR, FL 33027	□ Remove
			Change
MGR	RUTH C. BODIE	19752 NW 27TH AVENUE	⊒ Add
		MIAMI GARDENS, FL 33056	□ Remove
			☐ Change
	RUTH C. BODIE		
			□ Remove
			☐ Change

N	ONE
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reffec <u>te:</u> li	e date, if other than the date of filing:
reco he 9	and specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier of 00 th day after the record is filed.
ed_	UNIE 25 2019
	Signature of a member or authorized representative of a member
	RUTH C. BODIE
	Typed or printed name of signee