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	tolls Vietnamese Bistro LLC		
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	Amendment and fee(s) are sub ondence concerning this matter		
icase retain an corresp	ondence concerning this matter	to the tonowing.	
	Chris Trovas		
		Name of Person	
	Bowls & Rolls Vietnamese	Firm/Company	
	1112 Prospect Promanade		
	· · · · · · · · · · · · · · · · · · ·	Address	
	Panama City Beach, FL 32	459	
		City/State and Zip Code	
	wildolivesbistro104@gmail E-mail address: (.com to be used for future annual report notif	ication)
or further information (concerning this matter, please ca	all:	
Chris Trovas		850 393-3149 at ()	
Name	of Person	Area Code Daytime	Telephone Number
inclosed is a check for t	be following amount:		
■ \$25.00 Filing Fee	S30.00 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)
Regist Divisi P.O. F	LING ADDRESS: ration Section on of Corporations Box 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corpora Clifton Building 2661 Executive Cer	1 ations

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bowls & Rolls Vietnamese Bistro LLC

(<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on March 22, 2017 and assigned Florida document number L17000065786

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."

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:		<u> </u>
New Registered Office Address:		9
	Enter Florida str	eet address
		, Florida
	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

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Thao Crook	514 Parkwood Dr Panama City, FL	🖹 Add
			□ Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Chris Trovas and Thao Crook will be Managing Partners with equal 50/50 ownership.

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Effective date, if other than the date of filing:
<u>June 27, 2017</u> (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 605.0207 (3)(b)
<u>Note:</u> 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	2017	
GAT		
	Signature of a member or authorized representative of a member	
Christopher M. Trov		
	Typed or printed name of signce	

Page 3 of 3

Filing Fee: \$25.00