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FILED SECRETARY OF STATE FALLAHASSEE, FLORIDA COVER LETTER

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TO:	Registration Section Division of Corp					
SUBJI	ECT:	The	Oistrict Name of Lim	Gastro lited Liability Compan	par LL	<u>C</u>
	closed Articles of A			_		
Piease	return all correspon	uence conce	ming this matter	to the following:		
			Casey	Preston Name of Person		<del> </del>
			T&C C	Ownfown Firm/Company	Develop	oment LLC
			7107	udine a	ve	<del></del>
			Orlando	City/State and Zip C	32819	
			KC. the	district @ Common City State and Zip Common	mail.	.om
			E-mail address: (	to be used for future an	inual report notifi	cation)
For fu	rther information co	ncerning thi	is matter, please c	all:		
(	Casey Pres	ton		at (407	307	-7492
	Name of	Person		Area Code	Daytime	Telephone Number
Enclos	sed is a check for the	e following	amount:			
<b>⊠</b> \$2	25,00 Filing Fee		Filing Fee & ficate of Status	□ \$55,00 Filing Certified Cop (additional copy	у	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registra Divisior P.O. Bo	NG ADDRI tion Section of Corpora x 6327 (see, FL 323	n ations	Reg Div Clif 266	REET/COURII istration Section ision of Corpora ton Building 1 Executive Cer ahassee, FL 323	ntions nter Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The District Gaste	robat LLC
The District Gaste (Name of the Limited Liability Compan (A Florida Limited Li	<u>y as it now appears on our records.)</u> ability (Company)
The Articles of Organization for this Limited Liability Company v	were filed on 07/07/17 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
W/A	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	oclando, Fl 32806 # PE
(Principal office address MUST BE A STREET ADDRESS)	oclando, Fl 32806 # Fg
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered offregistered agent and/or the new registered office address here.	
Name of New Registered Agent:	
New Registered Office Address:	
	Enler Florida street address
	, Florida
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code
I hereby accept the appointment as registered agent and agre- provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as part being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am familiar with and rovided for in Chapter 605, F.S. Or, if this document is

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

If amending or removed	Authorized Person(s) authorized to mana from our records:	age, enter the	title, name	e, and address of eacl	n person being added
MGR = M AMBR = A	anager uthorized Member				
<u>Title</u>	<u>Name</u>	Address			Type of Action
MGR	T&C Downtown Development LLC	7900	S or	ange blossom	tr Add
		orland	o, FI	32809	■ Remove
			<u> </u>		Change
MGR	Casey Preston	7107	udine	ave	
		orland	, F1	32819	□ Remove
					Change
			<del> </del>	<del></del>	Add
				<del></del> -	Remove
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		<del></del>	-		Remove
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D. If ame	ending any other information, enter change(s) here: (Atta	tch additional sheets, if necessary.)	
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E. Effecti	ive date, if other than the date of filing: 2/12/18	(optional)	
(If an eff <b>Note:</b>	ective date is listed, the date must be specific and cannot be prior to date of If the date inserted in this block does not meet the applicable state ent's effective date on the Department of State's records.	f filing or more than 90 days after filing.) Pursuant to	605.0207 (3)(b) listed as the
	ord specifies a delayed effective date, but not an ef 90th day after the record is filed.	fective time, at 12:01 a.m. on the ea	rlier of:
Dated	February 12th 2018		
	Signature of a member or authorized rep	presentative of a member	-
	Casey Preston Typed or printed name of	\$ Colonia	_
	7 Typed or printed name of	or sikuce	
	Page 3 of 3		
	Filing Fee: \$2	1	