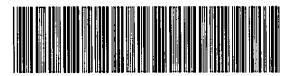
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## **COVER LETTER**

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	ill of Gainesville LLC		
•	Name of Limi	ted Liability Company	<del></del>
ed Articles of .	Amendment and fee(s) are subr	nitted for filing.	
n all correspo	ndence concerning this matter t	to the following:	
Registration Section Division of Corporations  Miami Grill of Gainesville LLC  T: Name of Limited Liability Company  seed Articles of Amendment and fee(s) are submitted for filing.  urn all correspondence concerning this matter to the following:  Bernard H Vogel  Name of Person  Miami Grill of Gainesville LLC  Firm/Company  6300 NW 31st Avenue  Address  Fort Lauderdale, FL 33309  City/State and Zip Code  shari@miamisubs.com  F:-mail address: (to be used for future annual report notification)  er information concerning this matter, please call:  H Vogel  Name of Person  Name of Person  Sat (Area Code)  Daytime Telephone Number  15 60,00 Filing Fee  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)			
	-	Name of Person	
	Miami Grill of Gainesville	LLC	
		Firm/Company	
	6300 NW 31st Avenue		
	<del></del>	Address	<del></del>
	Fort Lauderdale, FL 33309	1	
	shari@miamisubs.com	City/State and Zip Code	
	_	to be used for future annual report noti	fication)
information c	oncerning this matter, please ca	uli:	
Vogel		Name of Limited Liability Company  ment and fee(s) are submitted for filing.  concerning this matter to the following:  mard H Vogel  Name of Person  ami Grill of Gainesville LLC  Firm/Company  00 NW 31st Avenue  Address  rt Lauderdale, FL 33309  City/State and Zip Code  i@miamisubs.com  E-mail address: (to be used for future annual report notification)  ing this matter, please call:  at (\frac{516}{Area Code}) \frac{395-8103}{Daytime Telephone Number}  wing amount:  30.00 Filing Fee & Certified Copy (additional copy is enclosed)  Certificate of Status & Certified Copy (additional copy is enclosed)	
Name o	f Person	Area Code Daytim	e Telephone Number
a check for th	ne following amount:		
Filing Fee		Certified Copy	Certificate of Status & Certified Copy
	information co	Miami Grill of Gainesville LLC  Name of Limi  red Articles of Amendment and fee(s) are subset all correspondence concerning this matter.  Bernard H Vogel  Miami Grill of Gainesville  6300 NW 31st Avenue  Fort Lauderdale, FL 33309  shari@miamisubs.com  E-mail address: (i)  information concerning this matter, please can vogel  Name of Person  a check for the following amount:  Filing Fee  \$30.00 Filing Fee &	Miami Grill of Gainesville LLC  In the Marke of Limited Liability Company  In all correspondence concerning this matter to the following:  Bernard H Vogel  Name of Person  Miami Grill of Gainesville LLC  Firm/Company  6300 NW 31st Avenue  Address  Fort Lauderdale, FL 33309  City/State and Zip Code  shari@miamisubs.com  E-mail address: (to be used for future annual report not information concerning this matter, please call:  Vogel  Name of Person  Name of Person  Total address: (to be used for future annual report not at (

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Miami Grill of Gainesville LLC		
(Name of the Limited	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)	<del></del>
The Articles of Organization for this Limited Lia Florida document numberL18000103598	bility Company were filed on April 24, 2018	and assigned
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the wo	rds "Limited Liability Company," the designation "LLC" or the	
Enter new principal offices address, if applica	ble:	<b>6</b> V
(Principal office address MUST BE A STREET	ADDRESS)	SION
		75 P1
Enter new mailing address, if applicable:	<u></u>	
(Mailing address MAY BE A POST OFFICE B	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered off  Name of New Registered Agent:	or registered office address on our records, <u>ente</u> ice address here:	r the name of the nev
Name of New Neglitered Algeria		<u></u>
New Registered Office Address:	Enter Florida street 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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Evan B Friedman	6300 NW 31st Avenue	Add
		Fort Lauderdale, FL 33309	■ Remove
AMBR	Evan B Friedman	6300 NW 31st Avenue	Add
		Fort Lauderdale, FL 33309	Remove
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E. Effec	tive date, if other than the date of filing: April 24, 2018 (optional)		
(If an e	ffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursual	nt to 605	5.0207 (
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not nent's effective date on the Department of State's records.	. De HSB	cu as i
7 <b>6</b> 46	and an effective and affective data but not an effective time, at 12:01 a.m. on the	v oarli.	ar of
(b) Th	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the e 90th day after the record is filed.	: carm	ei oi.
	May 10 2018		
Date	··		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00