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COVER LETTER

ŤΟ:	Registration S Division of Co					
SUBJE			Name of Person Firm/Company way 1 Address each, FL 33408 City/State and Zip Code com nail address: (to be used for future annual report notification) tter, please call: at () 598-6417 Area Code Daytime Telephone Number int: g Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee.			
SOBJE	CI	Name of Lim	ited Liability Company			
The enc	losed Articles of	f Amendment and fee(s) are sub	mitted for filing.			
Please r	eturn all corresp	ondence concerning this matter	to the following:			
		Lori Smilie				
Name of Person						
						
		105 US Highway 1				
		Address				
		North Palm Beach, FL 334	408			
		Name of Limited Liability Company les of Amendment and fee(s) are submitted for filing. rrespondence concerning this matter to the following: Lori Smilie Name of Person BurgerFi Firm/Company 105 US Highway 1 Address North Palm Beach, FL 33408 City/State and Zip Code lori@burgerfi.com E-mail address: (to be used for future annual report notification) tion concerning this matter, please call: at (
		E-mail address: (to be used for future annual report notifi	cation)		
For furt	her information	concerning this matter, please c	all:			
Kristina	3 Shockley					
	Name	of Person	Area Code Daytime	for filing. following: Name of Person Firm/Company Address /State and Zip Code sed for future annual report notification) 561 598-6417 at (
Enclose	d is a check for	the following amount:				
\$25	.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy		
\$25	.00 Filing Fee		Certified Copy	Certificate of St Certified Copy		

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

Br Fort Myers, LLC				
(Name of the Limited	Liability Company A Florida Limited Lia	as it now appears on o	ur records.)	
The Articles of Organization for this Limited Lia Florida document number £18000246153	bility Company w	ere filed on 10/19/18		and assigned
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	the limited liabili	ty company here:		
The new name must be distinguishable and contain the wor	rds "Limited Liability	Company," the designar	tion "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applical	ble:			
(Principal office address MUST BE A STREET	ADDRESS)		·····	
Enter new mailing address, if applicable:			- - :	
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>			
			 ,	· · · ·
B. If amending the registered agent and/or registered agent and/or the new registered offi	_	ce address on our	records, enter t	he name of the i
Name of New Registered Agent:				
New Registered Office Address:	_	Enter Florida str	vet address	
		<u> </u>	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 a 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 ador removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Kevin Cooper	105 US Highway 1 North Palm Beach, FL 33408	■ Add
			□ Remove
			Change
MGR	Corey Winograd		Add
		105 US Highway 1 North Palm Beach, FL 33408	■ Remove
			Change
AMBR	BF Restaurant Management, LLC		
		105 US Highway I North Palm Beach, FL 33408	■ Remove
			Change
			Remove
			Change
			Add
			Remove
			Change
		 -	Add
			Remove
			□ Change

	-
	6/28/19
Effe	ctive date, if other than the date of filing: (optional)
	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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
	ment's effective date on the Department of State's records.
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of
) in	e 90th day after the record is filed.
	2019
Date	d
	Signature of a member or authorized representative of a member
	Market Charles
	Kristina Shockley

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Filing Fee: \$25.00