

Florida Department of State

Division of Corporations
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
14 BIS RESTAURANTS LLC

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
14 BIS RESTAURANTS LLC**

The Articles of Organization for this Florida Limited Liability Company were filed on 10/01/2019 and assigned Florida document number: L19000246400

EIN Number: 84-3352617

Article I

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 "L.L.C."

Article II

Enter new principal offices address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

2869 WILSHIRE DR, UNIT 104, ORLANDO, FL 32835

Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

Article IV

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: **RICHIE MATHAUS, ALBERT**

New Registered Office Address: **2869 WILSHIRE DR, UNIT 104, ORLANDO, FL 32835**

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

Title	Name	Address	Type of Action
AMBR	LOPES DA SILVA, RUTH	RUA PADRE LANDELL DE MOURA, 320 APT 51	REMOVE <input type="checkbox"/>
		SAO PAULO, SP 03337-080	ADD <input checked="" type="checkbox"/>
MGR	RICHIE MATHAUS, ALBERT	5165 NORTHLAWH WAY	REMOVE <input type="checkbox"/>
		ORLANDO, FL 32811	ADD <input checked="" type="checkbox"/>
AMBR	MATHAUS SILVA, ALBERT V.	5165 NORTHLAWH WAY	REMOVE <input checked="" type="checkbox"/>
		ORLANDO, FL 32811	ADD <input type="checkbox"/>

C. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

D. Effective date, if other than the date of filing: (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

DATED: march 10 . 2020

Albert Richie Mathaus
Signature of a member or authorized representative of a member

Albert Richie Mathaus
Typed or printed name of signee

Ruth Lopes da Silva
Signature of a member or authorized representative of a member

Ruth Lopes da Silva
Typed or printed name of signee

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