Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H200003910743)))



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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

from:

Maria Velez

Account Name

: PLANET HOLLYWOOD INTERNATIONAL, INC.

Account Number : I20080000100

* Please return

Phone : (407)903-5513

≯ax Number

: (407)352-7310

confirmation to

Enter the email address for this business entity to be used for future $\overset{C)}{\sqcup}$ annual report mailings. Enter only one email address please.

Email Address: mvelez@earlenterprise.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BRAVO RESTAURANTS, LLC

Certificate of Status 0 Certified Copy 0 Page Count 04 Estimated Charge S25.00

> . GILL KEF HON 7 7 5050

company has been notified in writing of this change.

H20000391074 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bravo Restaurants, LLC				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) inbility Company)		_	
The Articles of Organization for this Limited Liability Company Florida document number 1.20000152488	were filed on 6/3/2020	and	assigne	ed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
Brio (Irvine), LLC				
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the	ahhreviation	"L.L.C.	"
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)				
		54c.	123	
			<u> </u>	
B. If amending the registered agent and/or registered office a <u>agent and/or the new registered office address here</u> :	ddress on our records, enter the na	me of the	new re	gistered
agent and of the new registered office address here.			?2	
Name of New Registered Agent:		 	<u> </u>	
		~:	===	
New Registered Office Address:	Enter Florida street address			
•		-	_	
	, Florida _	Zip Co	de	 -
New Registered Agent's Signature, if changing Registered Agent;	•	•		
I hereby accept the appointment as registered agent and agree	e to act in this capacity, I further a	gree to co	mply w	vith the
provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my duties, and I am rovided for in Chapter 605, F.S. Oi	familiar r, if this de	with ar	nđ

If Changing Registered Agent. Signature of New Registered Agent

H20000391074 3

i de la companya de	
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 = M $AMBR = A$	ianager Authorized	Member		
<u>Title</u>	<u>Name</u>		<u>Address</u>	Type of Action
				□Add
				□Remove
		; !		Change
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	Dated _	November 11 2020
Jeffrey Sirolly		Signification and amended productionized representative of a member

Filing Fee: \$25.00