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## COVER LETTER

Division of Corporations
SUBJECT: Lily's Mediterranean Grill LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
KARIM AMIN GHUSSAINI Name of Person
Li, Ly's Mcditeranean Grill LLC Firm/Company
2373 Lake Heather Heights et
Dunedin, FL 34698 City/State and Zip Code
E-mail address: (so be used for future annual report notification)
For further information concerning this matter, please call:
Karim Chussaini at (734) 709 3532  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed)  □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
Mailing Address:  Registration Section  Street Address:  Registration Section

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

TO:

Registration Section

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CO. 1 . J. C. 2 . T. W. 17

Name of the Limited Liability	ty Company as it now appears or a Limited Liability Company)	Our records )
(A Florida	Limited Liability Company)	<u> </u>
The Articles of Organization for this Limited Liability C Florida document number <u>L20000 2475</u>	_	/ 13 / 2620 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	
Enter new mailing address, if applicable:	<del></del> -	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our reco	rds, enter the name of the new registered
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		
	Enter Florida s	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 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

WHITE - V	athorized (vielinger		
Title MGR	<u>Name</u>	<u>Address</u>	Type of Action
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MER	Karim Ghussaini	2373 Lake heather he	ghte Brad
		Dunedin, FL 34698	
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record specifies is filed.	a delayed effective	date, but not an	effective time	, at 12:01 a.m. on (	he earlier of: (b)	The 90th day after
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