LZI 000145485

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(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	_
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COVER LETTER

Tallahassee, FL 32314

TO:

TO:	Registration Se Division of Con		,	
enan	CT.		EES CHILIN GRILL, LLC	
SOBIE	CT:		nited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please r	eturn all correspo	ondence concerning this matter	to the following:	
			MATTHEW HEADLEY	
		· - * *	Name of Person	
		BIG C	HEEZEES CHILIN GRILL, LLC	
			Firm/Company	
			1110 WHITE STREET	
			Address	
			KEY WEST, FL 33040	
			City/State and Zip Code	
		Firmail addrage: (JULIEWMD@AOL.COM to be used for future annual report notification)	
For furt	her information c	concerning this matter, please co	•	
	MATTHE	W HEADLEY	810 853-9461	
	Name c	of Person	Area Code Daytime Telephone Number	
Enclose	d is a check for t	he following amount:	ORETAR TALLAND	
■ \$25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certificate of Status	
	Mailing Address Registration 1 Division of C P.O. Box 632	Section Corporations	Street Address: 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

and assigned BIG CHEEZEES CHILIN GRILL, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 03/29/2021 The Articles of Organization for this Limited Liability Company were filed on Florida document number _____ This amendment is submitted to amend the following: 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." 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) 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:

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being addedor removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	DEBORAH RUTH BUNTON	1518N LONG LAKE RD	□Add
		FENTON, MI 48430	■Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
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an effect ote: If	e date, if other than the date of filing:
ecord s	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
nted	November 30 2021
	Signature of a member of amhorized representative of a member