

L22000030145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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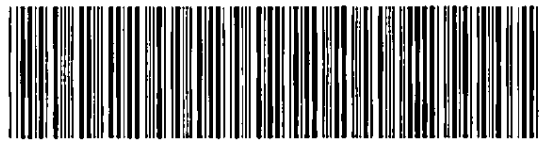
(Business Entity Name)

(Document Number)

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FILED

RECEIVED

2022 APR - 8 AM 9:30

2022 APR - 8 PM 2:58

CLERK OF STATE
TALLAHASSEE, FLORIDA

Amend

APR 11 2022
ALBRITTON

**CORPORATE
ACCESS,
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LLC AMEND

1. BTJ RESTAURANT GROUP, LLC

(CORPORATE NAME AND DOCUMENT #)

2.
(CORPORATE NAME AND DOCUMENT #)

3.
(CORPORATE NAME AND DOCUMENT #)

4.
(CORPORATE NAME AND DOCUMENT #)

5.
(CORPORATE NAME AND DOCUMENT #)

6.
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

BTJ RESTAURANT GROUP, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2022 APR - 8 AM 9:30
SECRETARY OF STATE
FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 01/27/2022 and assigned
Florida document number L22000030745

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**)

8441 International Drive

Suite 250

Orlando, FL 32819

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

14743 Crimson Bluff Alley

Winter Garden, FL 34787

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:

MICHAEL J. DAQUINO

New Registered Office Address:

14743 Crimson Bluff Alley

Enter Florida street address

Winter Garden

Florida 34787

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.

Michael J. Daquino
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	MICHAEL J. DAQUINO	14743 Crimson Bluff Alley	☒ Add
		Winter Garden, FL 34787	☐ Remove
			☐ Change
MGR	RAYMOND SURIS	395 North Service Road, Suite 302	☐ Add
		Melville, NY 11747	☒ Remove
			☐ Change
MGR	SEAN CHAMBERLAIN	395 North Service Road, Suite 302	☐ Add
		Melville, NY 11747	☒ Remove
			☐ Change
MGR	GEORGE BRERES	395 North Service Road, Suite 302	☐ Add
		Melville, NY 11747	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

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E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific.)

(If an 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 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated

4/7/22

Signature of ~~member~~ or authorized representative of a member

RAYMOND SURIS

Typed or printed name of signee

Filing Fee: \$25.00