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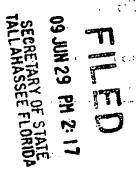
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COVER LETTER

	ion Section of Corporations	•		
SUBJECT:	JOES ES	SPRESSO LLC		
	Name of Limit	ted Liability Company		
The enclosed Artic	les of Amendment and fee(s) are sub	mitted for filing.		
Please return all co	rrespondence concerning this matter	to the following:		
		Joseph Hunt Jr		
		Name of Person		
		Firm/Company		
8110 Colonial Village Dr #103 Address				
		Tampa, FL 33625 City/State and Zip Code		
	JH E-mail address: (t	IUNT10590@aol.com o be used for future annual report notifica	tion)	
For further informa	tion concerning this matter, please c	all:		
Joseph Hunt Jr Name of Person		at (813) 85 Area Code & Daytime T	52-2042	
•		, nou coul a suy ame .	orephone (Value)	
Enclosed is a check	for the following amount:			
\$25.00 Filing F	ee \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JOES ESPRESSO LLC

FILED

(Name of the Limited Lia (A Flo	ability Company as it now appeared Limited Liability Company)	rs on our reconsiste	FLORIDA
The Articles of Organization for this Limited Liabi Florida document number	• • •	07/28/2004	and assigned
This amendment is submitted to amend the followi	ng:		
A. If amending name, enter the new name of th	e limited liability company he	re:	
J HU	NT ENTERPRISES LLC		
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Comp	any," the designation "L	LC" or the abbreviatio
Enter new principal offices address, if applicabl	e:		
(Principal office address MUST BE A STREET A	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, <u>enter t</u>	<u>he name of the nev</u>
Name of New Registered Agent:	·		
New Registered Office Address:	****		
	E	nter Florida street add	ress
_		, 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member Title Name **Address Type of Action** ☐ Add Remove Remove Add _____ Remove Remove □Add Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) June 26, 2009. Signature of a member or authorized representative of a member Toseph Hunt Jr.
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00