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DIVISION OF CORPORATIONS

OF OF PARTY OF STATE

OF OF CORPORATIONS

J. BRYAN
DEC - 2 2008
EXAMINER

, COVER LETTER

TO: Registration Section Division of Corp			
SUBJECT: Cafe, En	(Name of Limi	ice market LLC.	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	Carlos Franco	(Name of Person)	
	Cafe, Encuentros and se	rvice market.	ntin)
		(Firm/Company)	8 () S
	405 N. Main Street		
		(Address)	
	Kissimmee, Fl. 34744	(City/State and Zip Code)	08 DEC -1 PM 2: 47
For further information co	ncerning this matter, please ca		5
	······································		
Carlos Franco (Name of	ranco at (407) 572-4775 (Name of Person) (Area Code & Daytime Telephone Numb		elephone Number)
Enclosed is a check for the	following amount:		
☑ \$25.00 Filing Fee	□\$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

08 DEC -1	THE OF COME OF 2	
	2:47	A STATES

	•		SERVICE MA			P. F.
	(1)	ame of the Limiter	d Liability Company A Florida Limited Lia	y a s it now appear ability Company)	s on our records.)	، د
The Articles of O			Liability Company v	vere filed on <u>Sep</u>	tember 18 2008	and assigned
This amendment	is submitte	d to amend the fol	lowing:			
A. If amending	name, <u>ent</u>	er the new name o	of the limited liabil	ity company her	<u>e</u> :	
Coffeehouse, En	cuentros a	nd service market	LLC.			
The new name mu "L,L.C."	st be disting	guishable and end w	ith the words "Limite	ed Liability Compa	ny," the designation "LL	.C" or the abbreviation
Enter new princ	ipal office	s address, if appli	cable:			
(Principal office	<u>address M</u>	<u>UST BE A STREI</u>	<u>ET ADDRESS)</u>		· · · · · · · · · · · · · · · · · · ·	
						<u></u>
Enter new maili	ng address	s, if applicable:				
(Mailing address	MAY BE	A POST OFFICE	EBOX)			
•	, ,		or registered offi office address here:		ur records, <u>enter th</u>	e name of the new
Name o	f New Reg	istered Agent:		<u> </u>		····
New Re	gistered O	ffice Address:	·			
				(En	ter Florida street addr	ess)
			<u> </u>		, Florida	
				(City)		(Zin 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 = Ma MGRM = N	nnager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
· ·			Add Remove
			Add Remove
			Add Remove
······································			Add Remove
D. If amen	ding any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	
			DIVISION OF CORPORATION 08 DEC - 1 PM 2: 47
Dated No	Porte of	o 8. Toyu (5) To ro, authorized representative of a member	(1)
	<i>/</i> 2 \	or printed name of signee	.

Page 2 of 2

Filing Fee: \$25.00