## L09000047155

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S. HAWKES

JAN 2 6 2010

**EXAMINER** 

## **COVER LETTER**

Division of Co	rporations	·		
SUBJECT:	DDD FOOD GROU	UP ENTERPRISES, LLC		
SUBJECT.		ted Liability Company	<del></del>	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	JOSE	JOSEPH H. WOLENSKI, ESQ.		
		Name of Person		
	TH	THE ABREU LAW FIRM		
	Firm/Company			
	1001 BRICKELL BAY DRIVE, SUITE 2206			
		Address		
		MIAMI, FL 33131		
		City/State and Zip Code		
	WOL E-mail address: (1	ENSKI07@GMAIL.COM to be used for future annual report notifica	tion)	
For further information of	concerning this matter, please c			
Jose	ph H. Wolenski	at ( 305 ) 3	50.2700	
	of Person	Area Code & Daytime T		
Enclosed is a check for t	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:		STREET/COURIE	R ADDRESS:	

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

TO.

'Registration Section

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DDD FOOD GROUP ENTERPRISES, LLC

## (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) May 14, 2009 The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_ and assigned L09000047155 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 end with the words "Limited Liability Company," the designation "LEC" or the about "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 Office Address: Enter Florida street address . Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 **Type of Action** Title Name | **Address** MGR MARIO DOMANTI 11400 NW 41st Street Doral, FL 33178 GIUSEPPE DA PRATO MGR 11400 NW 41st Street Doral, FL 33178 7 Add Remove ☐ Add Remove ∏Add Remove  $\prod$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) January 15 2010 Signature of a member or authorized representative of a member Salvatore Domanti Typed or printed name of signee

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Filing Fee: \$25.00