L10000031997

(Requestor's Name)
(regarded a reality)
(Address)
(Address)
(City/State/Zip/Phone #)
, , , , ,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Boodineit Namber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Tyronia and the same of the sa

Office Use Only



500207152515

05/05/11--01017--018 **25.00

11 MAY -5 PM 1:44
SECRETARY OF STATE
FALL AHASSEE, FLORID

J. BRYAN

MAY - 9 2011

EXAMINER

23586 Calabasas Rd. Suite 102 Calabasas. CA 91302 Toll-Free 688-692-6778 | Fax: 818-879-8005 Empil customarservice@mycorporation.com

ROUTINE SERVICE FILING REQUEST

April 26, 2011

Division of Corporations Florida Department of State Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Amendment: Coffee-Tech Service, LLC

Ladies and Gentlemen:

Please find enclosed for filing amendment documents for the above referenced entity.

Also enclosed is a check for filing fees.

Please return the filed documents to the address below.

Thank you for your assistance.

Sincerely,

My Corporation 23586 Calabasas Rd., Suite 102 Calabasas, California 91302

PLEASE DIRECT ALL QUESTIONS REGARDING THIS FILING REQUEST TO THE POST FORMATIONS DEPARTMENT AT 877-692-6772.



COVER LETTER

Division of Corporations		
SUBJECT: COFFEE-TECH SERVICE, LLC		
SCBGEC1:	ited Liability Company)	
The enclosed Articles of Amendment and fee(s) are sub-	omitted for filing.	
Please return all correspondence concerning this matter	to the following:	TALLAHASSEE, FLORIF
Post Formation Filing	as	誓って
<u> </u>	(Name of Person)	SSEE SEE
MyCorporation		75. 7
	(Firm/Company)	· 第三
23586 Calabasas Ro	d., Suite 102	
	(Address)	
Calabasas, Californi		
	(City/State and Zip Code)	
For further information concerning this matter, please of	call:	
Post Formations	at (877) 692-6772	
(Name of Person)	at (<u>877</u>) 692-6772 (Area Code & Daytime T	'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) .	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS:	STREET/COURIER	ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



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 Changing Registered Agent, Signature of New Registered Agent)

· 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

	<u>Name</u>	Address	Type of Actio
, , , , , , , , , , , , , , , , , , ,	 		Ada
			To See S
			□ Ada
			RAMOY OR DE
			Add Remove
			_
			Add Remove
		,	□Add
			Remove
			Add
,			Remove
			
		ge(s) here: (Attach additional sheets, if necessary.)	 .
	ng any other information, enter change	ge(s) here: (Attach additional sheets, if necessary.)	 .
			
	Exhibit A***		

Page 2 of 2

Filing Fee: \$25.00

EXHIBIT A

Article II and V of the Articles of Organization are being amended and shall read as follows:

Article II

The street address of the principal office of the Limited Liability Company is:

8304 NW 36th Street Coral Springs, Florida 33065

The mailing address of the Limited Liability Company is:

8304 NW 36th Street Coral Springs, Florida 33065

Article V

The name and address of managing members/managers are:

Miguel Ramos 8304 NW 36th Street Coral Springs, Florida 33065

Caryn L Ramos 8304 NW 36th Street Coral Springs, Florida 33065

