26383 (RQM: 7673-72) Page: 1869 10/15/2012

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000248880 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : G & A ACCOUNTING AND TAXES SERVICES, INC.

Account Number : 120120000033 : (305)901-5394 Fax Number : (786) 231-5720

**Enter the email address for this business entity to be used for future mailings Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RL YOGURT DORAL, LLC

Certificate of Status	0
Certified Copy	U
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

OCT 1 6 2012

T. HAMPTON

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

RL Yogurt Doral LLC				
(Name of the Limited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)			
of Organization for this Limited Liability Company were filed on	06/13/2011	and assis		

The Articles of Organization for this Limited	Liability Company were filed of	n 06/13/2011	and assigned
Florida document number <u>L110000</u>	068695		
This amendment is submitted to amend the fi	ollowing:		
A. If amending name, enter the new name	of the limited liability compa	ıy here:	
	N/A		
The new name must be distinguishable and end "L.L.C."	with the words "Limited Liability	Company," the designation "L	LC" or the abbreviation
Enter new principal offices address, if app	licable: N/A		
(Principal office address MUST BE A STR.	CDT ADDRESOL		
	Monager the constraints of the		
Enter new mailing address, if applicable:	N/A		
(Mailing address MAY BE A POST OFFIC	T DAVI		
B. If amending the registered agent an registered agent and/or the new registered	d/or registered office address	on our records, enter th	
Name of New Registered Agent:	N/A		
New Registered Office Address:	***************************************		
		Enter Florida street addr	VSS
		, 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 Changing Registered Agent, Signature of New Registered Agent

10/15/2012	12:43 p	TO:+1	(850)	6176383	FROM: 7862315720
------------	---------	-------	-------	---------	------------------

MGR = Manager

MGRM = Managing Member

Page: 3

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:

<u>Title</u>	Name	Address	Type of Action	
MGRM	RICARDO CSADO	10781 NW 75TH ST DORAL, FL 33178	Add Remove	
MGRM	LAURA LUGO	10781 NW 75TH ST DORAL FL 33178	Add Remove	
MGRM	SanFelipe Investments LL	3072 MATILDA STREET MIAMI, FI, 33133	☑ Add ☑ Remove	
MGRM	re elogal supply tech advertibut hac	2315 NW 107 AVE SUITE IM 39 BOX 6 DORAL FL 33172	Add Remove	
			Add Remove	
and the state of t			Add Remove	
D. Ifame	eading any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)		
	N/A		SEGNETARY OF STATE DIVISION OF CORPORATIO 12 OCT 15 AM 8: 0	
Dated	09/30/12	<u>-</u> :	J III	
	RIC	or authorized representative of a member	Ac-14-Paular-Min	
Typed or printed name of signee				

Page 2 of 2

Filing Fee: \$25.00