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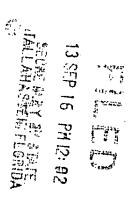
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COVER LETTER

Registration Section
Division of Corporations

SUBJECT: NEXTGEN BRANDS LLC DBA CARNIVAL DISCOUNT GROCERS OF

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALEJANDRO A. CORNELIO

Name of Person

NEXTGEN BRANDS LLC DBA CARNIVAL DISCOUNT GROV

Firm/Company

300 S STATE ROAD 7

Address

MARGATE, FL 33068

City/State and Zip Code

ACORNELIO@CARNIVAL-GROCERS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALEX CORNELIO

_{ar (}305 \282-9174

Name of Person

Area Code & Daytime Telephone 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

NEXTGEN BRANDS LLC DBA CARNIVAL DISCOUNT GROCERS OF MARGATE (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on 5/27/2010	and assigned
Florida document number L10000057384		
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	nility company horo	•
A. If amending hame, enter the new hame of the minted hat	mity company nere.	
The new name must be distinguishable and end with the words "Lim 'L.L.C."	ited Liability Company," the des	signation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	300 SOUTH STATE R	OAD 7
(Principal office address MUST BE A STREET ADDRESS)	MARGATE, FL 33068	p.*.
	· · · · · · · · · · · · · · · · · · ·	Zi →
Enter new mailing address, if applicable:	SAME AS ABOVE	De Carlo
(Mailing address MAY BE A POST OFFICE BOX)		The company of the company
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ETENS DO
Name of New Registered Agent: NOT APPL	ICABLE	
New Registered Office Address:		
	Enter Florida	street address
	. 1	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



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

<u>Title</u>	Name	Address	Type of Action
MGR_	CARLOS GALAN	13428 SW 23RD ST	Add
		MIRAMAR, FL 33027	Remove
			Add Remove
		£	
		ALL ALL SEED	Remove
		₹ 5½ ••••••••••••••••••••••••••••••••••••	Add Remove
			Add
			Remove
			Add
			Remove

D. If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
, <u>ALE</u>	JANDRO CORNELIO WILL HAVE 80% OF SHARES IN LLC
ANI	CARLOS GALAN WILL HAVE 20% OF SHARES
 -	
Dated SEPT	EMBER 12
	Signature of a member or authorized representative of a member
,	ALEJANDRO A. CORNELIO
•	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00



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