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O3 OCT 13 M II: 19
DIVISION OF CORPORATION





B3 OCT 13 PM 1:10 OFFICE USE ONLY(DOCUMENT #) LAZARUS CORPORATE FILING SERVICE 3320 S.W. 87 AVENUE MIAMI, FLORIDA (305)552-5973 OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) (Document #) (Corporation Name) (Document #) Pick up time 20 Walk in Certified Copy Certificate of Status Photocopy Mail out Will wait AMENDMENTS NEW FILINGS Profit Amendment Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Other Merger REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation

Reinstatement

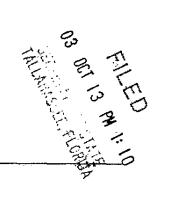
Examiner's Initials

Trademark

Other

CERTIFICATE OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CAFE BROWN LLC_



(Present Name) (A Florida Limited Liability Company)

FIRST	: The date of filing of the	articles of organization was	September 30, 2	2003
SECO	ND: The following amendme liability company:	nt(s) to the articles of organization	on was/were adopted by the li	mited
	First : Modify The	Article III_as foll	ow:	
	The New President, is as Follow:	Treasurer,Secretary	and Registerer Age	nt
!	Carlos A Labeau 5826 NW 113 Place Miami,Fl.33178	President	Carlos A Labeau 5826 NW 113 Place Miami,Fl.33178	Registerer Agency
;	Angel A Labean 5826 NW 113 Place Miami,Fl.33178	Treasurer		
į	Jennifer Pasariello 5826 NW 113 Placd Miami,Fl.33178	Secretary	•	
Dated _	October	10 ,20 03 .	≈ weeks	
	Signature	f a member or authorized represent	ative of a member	·

CANJOS A LABEAU

Typed or printed name of signee

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERD OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

REGISTERED AGENT SIGNATURE