(Re	questor's Name))
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phor	ne #)
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JAN 31 2017 S. YOUNG 7 JAN 30 PH 5: 34

COVER LETTER:

Division of Con			
	ND CAFE MANAGEMENT	LLC	
SUBJECT:	Name of Lin		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	EDUARDO NAMNUM		
		Name of Person	
	<u> </u>	Firm/Company	
	3363 NE 163 ST SUITE 8	05	
		Address	
	NORTH MIAMI BEACH	FL 33160	JAH 30
	EDUARDO@NAMNUM.G		- P
		to be used for future annual report notifica	ation) 5. CORID
For further information c	oncerning this matter, please c	all:	<u>a</u> (6)
EDUARDO NAMNUM		954 6543989 at ()	•
Name o	f Person	Area Code Daytime T	elephone Number
Enclosed is a check for the	ne 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)
MAIL	ING ADDRESS:	STREET/COURIER	t 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

BICE GRAND CAFE MANAGEMENT LLC		
(Name of the Limited Liability Con (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Compa	any were filed on MARCH 31,2006	and assigned
Florida document number L06000033944		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited I	iability company here:	
NAMNUM MANAGEMENT LLC		
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or the	abbreviation "L,L,C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	30
		7
		¥ 55-
Enter new mailing address, if applicable:		30 857
(Mailing address MAY BE A POST OFFICE BOX)		P mon
Training martess will be Al OSI Of I've DOA		2. O. S.
		<u> </u>
B. If amending the registered agent and/or registered	l office address on our records onto	the name of the new
registered agent and/or the new registered office address h		i the haine of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMDR - F	Authorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Remove
			Change
			□ Remove
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			PHOS: STATE Change Change
			☐ Remove
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				7 \
C. Effective date, if other than the did (If an effective date is listed, the date must be Note: If the date inserted in this blood document's effective date on the Dep	e specific and cannot be prior to date of the does not meet the applicable statute.	(option filing or more than 90 days after fil tory filing requirements, this d	ing.) Pursuant to 605.0207	7 (3)(b s the
f the record specifies a delayed of the record b) The 90th day after the record	effective date, but not an effe d is filed.	ective time, at 12:01 a.ı	m. on the earlier of	f:
Dated	, 2017			
- Juiza				
<u>- 4 </u>	gnature of a member or authorized repre	esentative of a member	<u> </u>	
EDUARDO NAMNUM				

Page 3 of 3

Filing Fee: \$25.00