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(Re	questor's Name)	
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(Ad	ldress)	
(Cit	ty/State/Zip/Phone #)	· ····
PICK-UP	WAIT	MAIL
		
(Bu	isiness Entity Name)	
(Do	cument Number)	
Certified Copies	Certificates of	Statue
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Special Instructions to	Filing Officer:	
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Office Use Only



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ALLAHASSEF, FIORIGA

D. BRUCE

MAY 2 7 2008

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations			
SUĖJI	ECT: Delicio So LLC (Name of Limited Liability Company)			
The en	aclosed Articles of Amendment and fee(s) are submitted for filing.			
Please	return all correspondence concerning this matter to the following:			
	Haria Elena Dia 2 (Name of Person)	.		
	DeLicioso LLC (Firm/Company)	-		
	10139 Orchid Road (Address)	SECRET	08 MAY	arrived to
	Port Richel FL 34668 (City/State and Zip Code)	ARY OF S ASSEE, FL	23 AH 10: 46	
For fur	rther information concerning this matter, please call:	TATE ORIDA	971:(
M	Avia Elena Dia Z at (727) 992-2016 (Name of Person) (Area Code & Daytime Telephone Numb	er)	- -	
Enclos	sed is a check for the following amount:			
\$25	5.00 Filing Fee \$\ \text{Solution} \ \ \text{Solution} \ \ \text{Certificate of Status} \ \text{Certified Copy} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ate of St d Copy	tatus &	

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 9, 2008

MARIA ELENA DIAZ 10139 ORCHID ROAD PORT RICHEY, FL 34668

SUBJECT: DELICIOSO LLC Ref. Number: L06000040321

08 MAY 23 AM IO: L6
SECRETARY OF STATE

We have received your document for DELICIOSO LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Letter Number: 008A00029816

Deborah Bruce Regulatory Specialist II

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Deficios OLLC

Liability Company as it now appears on our r Florida Limited Liability Company)	ecords.)
iability Company were filed on <u>April</u>	18.2006 and assigned
owing:	O8 MAY 23 F
f the limited liability company here:	E.FLOR
th the words "Limited Liability Company," the deformance of the confice address on our recorffice address here:	•
Maria Elena Dia 10139 Orchic Ro (Enter Florid Part Aichey (City)	da street adaress)
i	ability Company were filed on

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 = Mai MGRM = M	nager Ianaging Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Jorge Pulex	Don't Know	Add. Kemove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			AddRemove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if neces	sary.)
	5/17/08	Г. АПАЗ ОГ.	SECKLIAK DE STATE
Dated	Maria Elina Signature of a member	er or authorized representative of a member	
	Maria Elena Typed	d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00