L06000111769

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EXAMINER

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04/09/09--01035--013 **25.00

COVER LETTER

TO:

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SURJECT: HOLLY	WOOD CREAMERY	Y LLC			
		ited Liability Company)			
	Amendment and fee(s) are sub ondence concerning this matter	-		•	
	MOHAMMAD AHMAD				
		(Name of Person)			
	HOLLYWOOD CREAME	RY LLC			
	Pu	20			
	3402 SW 154 CT		LLA A	2009 APR -9	7
		(Address)	ASSEE	સ્તુ⊱ 9-9	F
	MIAMI, FL 33185		ři c	~ ~	TILITU
•	<u>``</u>	(City/State and Zip Code)	FĽO:	1 3: 56	C
For further information c	concerning this matter, please c	all:	FLORIDA	56	
MOHAMMAD AHMAD		at (305) 484-4561			
	of Person)	(Area Code & Daytime T	'elephone Number)		
Enclosed is a check for the	he 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 Sta Certified Copy (additional copy	atus &	ı
Registr	ING ADDRESS: ration Section on of Corporations	STREET/COURIER Registration Section Division of Corporation			

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HOLLYWOOD CREAMERY LLC			_
(Name of the Limite	d Liability Company as it no A Florida Limited Liability Co	w appears on our records.) mpany)	
The Articles of Organization for this Limited 1	l on 11/17/2006 an	and assigned	
Florida document number L06000111769			
This amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name	of the limited liability comp	pany here:	
The new name must be distinguishable and end w "L.L.C."	rith the words "Limited Liabilit	y Company," the designation LLC APR	the abbreviation
Enter new principal offices address, if appli	cable:		<u> </u>
(Principal office address MUST BE A STRE	ET ADDRESS)	3388 9 Y 8	
		T'S	
		ORI OR	
Enter new mailing address, if applicable:		0m 6	
(Mailing address MAY BE A POST OFFICE	= <u></u>		
B. If amending the registered agent and registered agent and/or the new registered of		ess on our records, enter the na	me of the ne
Name of New Registered Agent:	ALI AHMAD		
	2402 CW 154 CT		
New Registered Office Address:	3402 SW 154 CT	(Enter Florida street address)	
	MIAMI	, Florida 33185	
	(City)		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 **Address** Type of Action **Title** <u>Name</u> MGR SAADA AHMAD 3402 SW 154 CT Add Remove MIAMI FL 33185 ☐ Add Remove Remove □ Add Remove Add Remove 🔀 Add 🕻 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated APRIL 1

Moldman June

Signature of a member or authorized representative of a member

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00