

L07000004399

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TROPICAL ICE CREAM FACTORY LLC

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J. BRYAN

JUN 24 2008

EXAMINER

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: TROPICAL ICE CREAM FACTORY LLC**  
(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:

Francyne Camillo  
(Name of Person)

Legalzoom.com, Inc.  
(Firm/Company)

7083 Hollywood Blvd., Suite 180  
(Address)

Los Angeles, CA 90028  
(City/State and Zip Code)

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For further information concerning this matter, please call:

Francyne Camillo at ( 323 ) 962-8600  
(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

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**TROPICAL ICE CREAM FACTORY LLC**

(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 1/12/2007 and assigned Florida document number L07000004389.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

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 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

Table with 4 columns: Title, Name, Address, Type of Action. Contains entries for Robert V Cote Jr and James D. Young, C.A., both with 'Add' checked and 'Remove' unchecked.

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Article 9. Ownership Percentage
Matthew Guarnieri, Operating Manager, has 61%
Robert V Cote Jr, Procurement Officer has 29%
Anna Phillips, Secretary has 0%
James D. Young, C.A. Officer has 10%

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Dated [Signature]
Signature of a member or authorized representative of a member
Robert Cote, Manager
Matthew Guarnieri
Typed or printed name of signer