

L0700001543

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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☐

MAIL

(Business Entity Name)

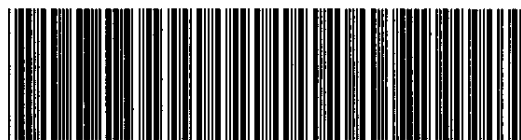
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 OCT -4 PM 12:25

T. HAMPTON
OCT -5 2010
EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MI BELLA CUBA NICA 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:

NOEL E MANFUT JR.

Name of Person

Firm/Company

11364 QUAIL ROOST DRIVE

Address

MIAMI, FL 33157

City/State and Zip Code

N/A

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GEORGE M MANFUT

Name of Person

at (**786**)

242-7272

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

MI BELLA CUBA-NICA LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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The Articles of Organization for this Limited Liability Company were filed on 01/31/2007 and assigned

Florida document number L07000011543.

This amendment is submitted to amend the following:

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

FRITANGA LOS NICAS LLC

The new name must be distinguishable and end with the words "Limited Liability 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**)

11364 QUAIL ROOST DRIVE

MIAMI, FL 33157

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

11364 QUAIL ROOST DRIVE

MIAMI, FL 33157

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:

NOEL E MANFUT JR.

New Registered Office Address:

11361 SW 155 ST

Enter Florida street address

MIAMI

Florida

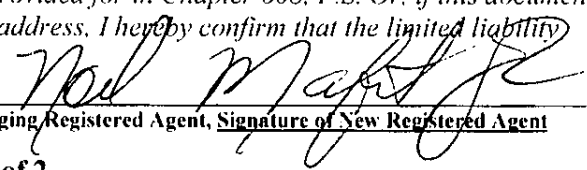
33157

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

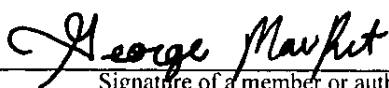
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	MARIA N MANFUT	11361 SW 155 ST MIAMI, FL 33157	☐ Add ☒ Remove
MGRM	GEORGE M MANFUT	11361 SW 155 ST MIAMI, FL 33157	☒ Add ☐ Remove
MGR	ZOREN Y MANFUT	11361 SW 155 ST MIAMI, FL 33157	☒ Add ☐ Remove
MGR	NOEL E MANFUT JR	11361 SW 155 ST MIAMI, FL 33157	☒ Add ☐ Remove
MGR	KEVIN A MANFUT	11361 SW 155 ST MIAMI, FL 33157	☒ Add ☐ Remove
			☐ Add ☐ Remove

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

Dated _____



Signature of a member or authorized representative of a member

GEORGE M MANFUT

Typed or printed name of signee

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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