## L08000019011

| (Requestor's Name)                      |
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|   |
| (Address)                               |
|   |
| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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## **COVER LETTER**

| Division of Corporations  |
|---|
| SUBJECT: Casa Havana Cigar & Cafe, 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:  |
| Gonzalo Valdes (Name of Person)   |
| Casa Havana Cigar & Cafe, LLC (Firm/Company)  |
| 204 Boardwalk Place East (Address)  |
| Madiera Beach, FL 33708 (City/State and Zip Code)   |
| For further information concerning this matter, please call:  |
| (Name of Person) (Area Code & Daytime Telephone Number)   |
| Enclosed is a check for the following amount:   |
| \$25.00 Filing Fee \$30.00 Filing Fee \$ S55.00 Filing Fee \$ S60.00 Filing Fee, Certificate of Status \$ Certified Copy (additional copy is enclosed) 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

FILED

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SECRETARY OF STATE TALLAHASSEE FLORIDA

| Casa Havana Cigar & Cafe  | e, LLC   |   |  |
|---|--|---|--|
| ( <u>Name of the Limite</u>   | d Liability Company as it now appe<br>A Florida Limited Liability Company              | ars on our records.)                            |  |
|   |  |   |  |
| The Articles of Organization for this Limited I                                       | Liability Company were filed on F  | ebruary 22, 2008 and assigned                   |  |
| Florida document number <u>L08000019011</u>   | ·*   | •   |  |
| This amendment is submitted to amend the following                                    | lowing.  |   |  |
| This unlertained is sublimited to afficial the for                                    | iowing.  |   |  |
| A. If amending name, enter the new name of  | of the limited liability company h   | ere:  |  |
| The new name must be distinguishable and end w  | ith the words "Limited Liability Com   | nany" the decignation "LLC" or the abbreviation |  |
| "L.L.C."  | idi the words. Ellined Elability Coll  | pany, the designation LLC of the aboreviation   |  |
|   |  |   |  |
| B. If amending the registered agent and registered agent and/or the new registered of |  | our records, enter the name of the new          |  |
|   | -  |   |  |
|   |  |   |  |
| Name of New Registered Agent:   | Gonzalo Valdes   |   |  |
| New Registered Office Address:  | New Registered Office Address: 204 Boardwalk Place East (Enter Florida street address) |   |  |
|   |  |   |  |
|   | Madiera Beach  | , Florida <u>33708</u>                          |  |
|   | (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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

| MGRM = N     | Anaging Member                         |   |   |
|--------------|--|---|---|
| <u>Title</u> | <u>Name</u>                            | Address   | Type of Action  |
| MGR          | Juan Antonio Rivera                    | 6355 GULF BLVD<br>ST PETE BEACH FL 33706            | Add Remove  |
| MGR          | GONZALO VALDES                         | 204 Boardwalk Place East<br>MADIERA BEACH, FL 33708 | ✓ Add Remove  |
|              | ·                                      |   | Add<br>Remove   |
|              |  |   | Add<br>Remove   |
|              |  |   | Add Remove  |
|              | -                                      |   | Add<br>Remove   |
|              | ling any other information, enter char | nge(s) here: (Attach additional sheets, if necessar | OB APR 30 PM 12: 26 SEGRETARY OF STATE SEGRETARY OF STATE |
| Dated        |  | er or authorized representative of a member         |   |
|              |  | ed or printed name of signee                        |   |

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Filing Fee: \$25.00