

Florida Department of State

Division of Corporations Public Access System

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Corporate Filing Menu

Help

Apr 14 08 06:47a

p.2

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Chocolate 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 Carrillo	
(Name of Person)	
Legalzoom.com, Inc.	·
(Firm/Company)	ZED SEL
7083 Hollywood Blvd., Suite 180	Z008 APR SECRETA
(Address)	ιώξο — —
Los Angeles, CA 90028	
(City/State and Zip Code)	FSI
For further information concerning this matter, please call:	D 10: 54 STATE LORIDA
Francyne Carrillo at (323) 962-8600	
(Name of Person) (Area Code & Daytime T	elephone Number)
Enclosed is a check for the following amount:	
\$25.00 Filing Fee & \$30.00 Filing Fee & Certificate of Status 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 Tallahassea, FL 32301

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Chocolate LLC

р. Э

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(A Florid	a Limited Liability Company)	h.trr.)	
The Articles of Organization for this Limited Liability	Company were filed on 03/06/2008	and assigned	
Fiorida document number <u>L08000023915</u>	··	2000 SEC	
This amendment is submitted to amend the following:	:	APR 16 CRETARY AHASSE	
A. If amending name, enter the new name of the U	inited liability company here:		
Covered in Chocolate LLC			
The new name must be distinguishable and end with the v"L.L.C."	words "Limited Liability Company," the desig	THE ADDREVIATION	
B. If amending the registered agent and/or reg registered agent and/or the new registered office as		, enter the name of the new	
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 Changlog Registered Agent, Signature of New Registered Agent)

Apr 14 08 06:48a

p. 4

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

MCR = M MGRM = I	anager Managing Member		•
<u>Title</u>	Name	Address	Type of Action
	<u> </u>		Add Remove
<u></u> _			Add Rumove
	· ·		Add Remove
			Add Remove
			Add Romove
			Add Remove
D. If amen	ding any other information, enter chang	e(s) here: (Attach additional sheets,	ZOON A
			PR 16 A ASSEE, FL
Dated H	1 14 SICHTUBER	US	RIDA RIDA
	Erica Hubert, Member		
	Typed	or printed name of signee	

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Page 2 of 2

Filing Fee: \$25.00