## 8809200080

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Eddinose Zhar, Namo,
(Document Number)
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**EXAMINER** 



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SECRETARY OF STATE DIVISION OF CORPORATION

## **COVER LETTER**

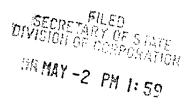
TO: Registration Section Division of Corporations	
SUBJECT: AZIAN DELIGHT, LLC	
(Name of Limited Liability Company)	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
SCOTT MARGULES, ESQ.	
(Name of Person)	
LAW OFFICES OF SCOTT MARGULES, P.A.	
(Firm/Company)	
20801 BISCAYNE BLVD., SUITE 303	
(Address)	
AVENTURA, FL 33180	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
SCOTT MARGULES, ESQ. <u>at (305 ) 933-8933</u>	
(Name of Person) (Area Code & Daytime Telephone Number)	)
Enclosed is a check for the following amount:	
(additional copy is enclosed) Certified C	e of Status &

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



AZIAN DELIGHT, LLC		
	i <mark>bility Company as it now appears on</mark> orida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liabil	lity Company were filed on 03/20/0	and assigned
Florida document number <u>L08000029088</u>	·	
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
MS & DS, LLC		
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Company,"	the designation "LLC" or the abbreviation
B. If amending the registered agent and/or r registered agent and/or the new registered office	_	records, <u>enter the name of the new</u>
•		
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 = N	Aanaging Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add
			Add Remove
			Add Remove
D. If amen	ding any other information, enter cha	ange(s) here: (Attach additional sheets, if necessary.	
_			
_			
Dated Apri	129 , 20	080	
		ber or authorized representative of a member	<del></del>
	S Typ	COTT MARGULES ped or printed name of signee	<del></del>
	<i>'</i>		

Page 2 of 2

Filing Fee: \$25.00