Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000209019 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 61.7-6383

Account Name : FASTKIT CORPORATE OUTFITS

Account Number : 071001002335

Phone : (305)599-0839 Fax Number : (305)716-0346

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

SPOON DOWNTOWN MIAMI LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

J. BRYAN

SEP - 8 2008

onic Filing Menu

Corporate Filing Menu

EXAMINER

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SPOON DOWNTOWN MIAMI L		•	records.)
(Name of the Limited	Liability Company as it Borida Limited Liability	now appears on our	rescords.)
•			'n
The Articles of Organization for this Limited L	iability Company were fi	iled on 04/11/2008	and assigned
Florida document number L08000039026			3
			<u>ب</u>
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liability co	mnany hero	
STATE OF THE PARTY	Canadameter Halbuille Co.	mpany nere.	
The new name must be distinguishable and end wit	th the words "Limited Liat	oility Company." the	designation "LLC" or the abbreviation
"L,L,C."			
Enter new principal offices address, if applic	abic:		•
(Principal office address MUST BE A STREE			
			
•	` <u></u>	· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable:			, •
(Mailing address MAY BE A POST OFFICE	BOX) ·		

•	• • • • • • • • • • • • • • • • • • •		
B. If amending the registered agent and/	or registered office ad	dress on our reco	rds, enter the name of the nev
registored agent and/or the new registered of	fice address here:		
Name of New Registered Agent:	*	**************************************	·
New Registered Office Address:			
		(Enter Flor	ida street oddress)
			, Morida
•	(City))	(Zip Code)
New Registered Agent's Signature, if changing I	Registered Agent:	•	
••			e de la companya de l
I hereby accept the appointment as registere the provisions of all statutes relative to the p	d agent and agree to according to the	st in this capacity Hormance of my di	I further agree to comply with vies, and I am familiar with and
accept the obligations of my position as regi	stered agent as provide	d for in Chapter 6	08, F.S. Or, if this document is
being filed to merely reflect a change in the	registered office addres	ss, I hereby confirm	n that the limited liability
company has been notified in writing of this	anange.		

H08000209019 3

H08000209019 3

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:

Namo	•	
	Address	Type of Action
WILLIAM KAKON	3029 NE 188 ST #407 AVENTURA, FL 33180	Add
MARIE YVONNE GABAY	3029 NE 188 ST #407	m☑ Add Remove
	EXCENSED STOV	Remove
		Add Remove
		Remove
		Add Remove
		Add 😕
		Remes St
ng any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary	יאל לי
		- 8:
		<u>.</u>
MBER 3 , 2008		
	r or authorised representative of a member	
	MARIE YVONNE GABAY g say other information, enter change ABER 3 , 2008 Signature of a member will liam KAKON	MARIE YVONNE GABAY 3029 NE 185 ST #407 AVENTURA FL 33180 g any other information, enter change(s) here: (Attach additional sheets, if necessary) ABER 3 , 2008 Signature of a member or authorized representative of a member

Filing Fee: \$25.00