## 108000050432

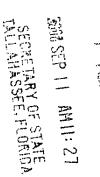
| (Requestor's Name)                      |
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| PICK-UP WAIT MAIL                       |
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| (Business Entity Name)                  |
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| (Document Number)                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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T. CLINE

SEP 12 2008

**EXAMINER** 



August 29, 2008

ADRIANA DE PAZOS 3564 AVALON PARK BLVD., STE 1 ORLANDO, FL 32828

SUBJECT: CUBITA BAKERY, LLC Ref. Number: L08000050432

We have received your document for CUBITA BAKERY, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please cal (850) 245-6020.

Letter Number: 908A00048074

Tammi Cline Regulatory Specialist II

## **COVER LETTER**

| Division of Corp            | orations                                    |  |   |          |   |
|-----------------------------|---|--|---|----------|---|
| SUBJECT: CUBITA             | BAKERY, LLC                                 |  |   |          | •   |
| SUBJECT,                    | (Name of Limi                               | ted Liability Company)   |   |          | _   |
|                             |   |  |   |          |   |
| The enclosed Articles of A  | mendment and fee(s) are sub-                | mitted for filing.   |   |          |   |
| Please return all correspon | dence concerning this matter                | to the following:  |   |          |   |
|                             | ADRIANA DE PAZOS                            |  |   |          |   |
|                             |   | (Name of Person)   |   |          |   |
|                             | <u></u>                                     |  |   |          |   |
|                             |   | (Firm/Company)   |   |          |   |
|                             |   |  |   |          |   |
|                             |   | (Address)  |   |          |   |
|                             | ORLANDO, FL 32828                           |  |   |          |   |
|                             |   | (City/State and Zip Code)  |   |          |   |
| For further information co  | ncerning this matter, please c              | all:   |   | MOS SE   | made Cont.  |
| ADRIANA DE PAZOS            |   | at ( 407 ) 281-6422  | TAR   | P        | and desirements<br>and desirements<br>and desirements |
| (Name of                    | Person)                                     | (Area Code & Daytime To  | elephone Number   | 墨        | 1 1   |
|                             |   | ,  | T S   | <br><br> | 3   |
| Enclosed is a check for the | e following amount:                         | •  | 70 T  | 27       |   |
| ☑ \$25.00 Filing Fee        | □\$30.00 Filing Fee & Certificate of Status | □\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | □\$60.00 Filing Fe<br>Certificate of S<br>Certified Copy<br>(additional cop | Status & | losed)  |

MAILING ADDRESS:

TO:

Registration Section,

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

| CUBITA BAKERY, LLC   |                                      |   |                          | <b>5</b> 3   |
|--|--------------------------------------|---|--------------------------|--|
| ( <u>Name of the Limited</u><br>(A   | Liability Compa<br>Florida Limited I | ny as it now appears on c<br>Liability Company) | our records.)            | <del>_</del>   |
| The Articles of Organization for this Limited Li                                       | ability Company                      | were filed on MAY 20,                           | 2008                     | _ and assigned   |
| Florida document number L08000050432   | ·                                    |   |                          |  |
| This amendment is submitted to amend the follo   | wing:                                |   |                          |  |
| A. If amending name, enter the new name of   | the limited liab                     | ility company here:                             |                          |  |
| The new name must be distinguishable and end with "L.L.C."                             | h the words "Limi                    | ited Liability Company," t                      | he designation "LLC      | " or the abbreviation  |
| Enter new principal offices address, if applica  | 4751 S. OLD GOLDE                    | NROD ROAD                                       |                          |  |
| (Principal office address MUST BE A STREET ADDRESS)                                    |                                      | ORLANDO, FL 3282                                |                          |  |
|  |                                      |   | PS                       | 3  |
|  |                                      |   | 2.                       | SE   |
| Enter new mailing address, if applicable:  |                                      | ,   | ASSA                     | Special Street S |
| (Mailing address MAY BE A POST OFFICE BOX)   |                                      |   | mog                      |  |
|  | <del></del>                          |   | 100                      |  |
|  |                                      | ·-  | <u> </u>                 | :2   |
| B. If amending the registered agent and/oregistered agent and/or the new registered of |                                      |   | ecords, <u>enter the</u> | name of the ne   |
| Name of New Registered Agent:  | AFFORDABLI                           | E TAX & ACCOUNTING                              | SERVICES, INC.           | #254   |
| New Registered Office Address:   | 3564 AVALO                           | N PARK BLVD., STE 1                             |                          |  |
|  |                                      | (Enter F  | lorida street addre      | ss)  |
|  | ORLANDO                              |   | , Florida <u>3282</u> 8  | 3  |
|  |                                      | (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 = M<br>MGRM = | anager<br>Managing Member                | •  |                |
|-------------------|--|--|----------------|
| <u>Title</u>      | Name                                     | <u>Address</u>                                 | Type of Action |
| MGR               | MARIO ARIET                              | 7723 SW 26TH PLACE<br>GAINESVILLE, FL 32608    | Add Remove     |
|                   |  |  | Add Remove     |
| D. If ame         | ending any other information, enter chan | nge(s) here: (Attach additional sheets, if nec |                |
| -                 | BERNABEL PINEDA HOLDS 90% OWNE           |  |                |
| <u> </u>          | MARIO ARIET HOLDS 10% OWNERSHIF          |  |                |
|                   |  |  | <del></del>    |
| -                 |  |  |                |
| Dated A           |  | ber or authorized representative of a member   |                |
|                   | BERNABEL PINEDA Typ                      | ed or printed name of signee                   |                |

Page 2 of 2

Filing Fee: \$25.00