LOBOOOR 325H

(I	Requestor's Name)		
(,	Address)		
(Address)		
	City/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL	
(1	Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of Statu	us	
Special Instructions	to Filing Officer:		

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COVER LETTER

TO:	Registration S Division of Co				
SUBJE	CT:	PASTRY 8	BAKERY D	DELIGHTS	
	- · · ·		Name of Lim	ited Liability Company	
The en	closed Articles o	f Amendment	and fee(s) are su	bmitted for filing.	
Please	return all corresp	ondence cond	erning this matte	er to the following:	
		E\	VELYN RIVE	ERA EA MBA Name of Person	
		A(CCOUNTING	CENTER FOR SMALL BUS	INESS LLC
				Firm/Company	
		5	701 DOGWOO	DD DR	
		-		Address	<u>. </u>
		OF	RLANDO FL	32807	
				City/State and Zip Code	
		acc	corl@aol.c E-mail address:	COM (to be used for future annual report notifica	ation)
For fur	ther information	concerning th	is matter, please	call:	
	EVELYN	RIVERA		407 . 201 0227	
Name of Person		at (407) 281-0227 Area Code & Daytime Telephone Number			
Enclose	ed is a check for	the following	amount:	•	
□\$25	.00 Filing Fee		Filing Fee & ficate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Regis Divisi P.O. I	LING ADDR tration Section ion of Corpora Box 6327 nassee, FL 323	n ations	STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent	ions

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u> </u>	J & A FINANCIAL FREEDOM LLC ame of the Limited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization	for this Limited Liability Company were filed on Sept	tember 2,2008 and 2
Florida document number	L08000083254 .	2

A. If amending name, enter the new name of the limited liability company here:

This amendment is submitted to amend the following:

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

PASTRY & BAKERY DELI	GHTS, LLC		52	
The new name must be distinguishable and end w "L.L.C."	vith the words "Limited Liability Company	ny," the designation "LLC" of	or the ab	breviation

Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flo	rida street address
		_, Florida
	City	Zin 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 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 = I	Manager = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
	· · · · · · · · · · · · · · · · · · ·		Add Remove
			Add Remove
D. If am	ending any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	_
			
	NOVEMBER : 24		<u> </u>
Dated	/www.	2011 .	
	Pedro 1	d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00