

LD8000110930

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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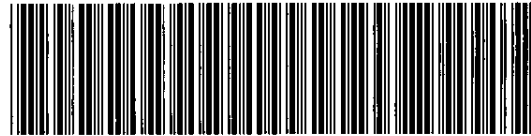
(Business Entity Name)

(Document Number)

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11 OCT 31 PM 4:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. Culligan

OCT 31 2011



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 12, 2011

ADELINA C. POLO
5648 INTERNATIONAL DRIVE
ORLANDO, FL 32819

SUBJECT: BRAZIL 24HRS. BAKERY & CAFE LLC
Ref. Number: L08000110930

We have received your document for BRAZIL 24HRS. BAKERY & CAFE LLC and your check(s) totaling \$. 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 call (850) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 011A00023441

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BRAZIL 24HRS. BAKERY & CAFE 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:

ADELINA C. POLO

Name of Person

BRAZIL 24HRS. BAKERY & CAFE LLC

Firm/Company

5648 INTERNATIONAL DR.

Address

ORLANDO FL 32819

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RUBEN D. TORO

Name of Person

at (**407**)

370-6445

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
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
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

11 OCT 31 PM 4:37

BRAZIL 24HRS. BAKERY & CAFE LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 12/03/2008 and assigned
Florida document number L08000110930.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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:

ADELINA C. POLO

New Registered Office Address:

3407 HAGAN AVE.

Enter Florida street address

ORLANDO

Florida

32819

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.

Adelina C. Polo
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 = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	CESAR T. HENRIQUE	5615 ESTABROOK WOODS DR. APT 4 ORLANDO FL 32839	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	JULIANA S. HENRIQUE	5615 ESTABROOK WOODS DR APT 4 ORLANDO FL 32839	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	CAROLINA S. HERINQUE	5615 ESTABROOK WOODS DR APT 4 ORLANDO FL 32839	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	KAIO G. POLO	3407 HAGAN AVE. ORLANDO FL 32819	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

FILED
 11 OCT 31 PM 4:37
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Dated 10/07, 2011.

Adelina C. Polo

Signature of a member or authorized representative of a member

ADELINA C. POLO

Typed or printed name of signee