

LO8000117684

Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

Phone : (305) 634-3694

Fax Number : (305) 633-9696

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**CAFE-DELI RENDEZ-VOUS, LLC**

Certificate of Status	0
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D. BRUCE
JUN 08 2009
EXAMINER

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

CAFE-DELI RENDEZ-VOUS, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 12/30/2008 and assigned
Florida document number L08000117684.

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:

New Registered Office Address:

Enter Florida street address

City, Florida 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

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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

Title	Name	Address	Type of Action
MGRM	LAURENT ISOREZ	3237 RIVIERA DRIVE CORAL GABLES, FL 33134 US	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	LAURE ISOREZ	3237 RIVIERA DRIVE CORAL GABLES, FL 33134 US	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	CAROLE CHATRE	92 MIRACLE MILE CORAL GABLES, FL 33134 US	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
M	FRANCK SERANO	92 MIRACLE MILE CORAL GABLES, FL 33134 US	<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

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

Dated JUNE 5, 2009

Signature of a member or authorized representative of a member

LEONARDO F. BRITO

Typed or printed name of signer

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