

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : PAGTO'S TAX SERVICES

Account Number: 120100000043 Phone: (305)397-8553

Phone : (305)397-8553 Fax Number : (305)397-8521

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

NOV - F AM 6: 23

ELC AMND/RESTATE/CORRECT OR M/MG RESIGN GABINO CAFE, LLC

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Certified Copy	0
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EXAMINER

Electronic Filing Menu

Corporate Filing Menu

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¥4	* * *	COVER LETTI	ER" *	CH 100000 20 10 10 10 10 10 10 10 10 10 10 10 10 10
TO: Registration Sect Division of Corpo		·	уч	•
SUBJECT:		NO CAFE, LLC	<u> </u>	
	Name of Lin	nited Liability Company		
The enclosed Articles of Ar	mendment and fee(s) are su	abmitted for filing.		
Picase return all correspond	lence concerning this matte	er to the following:		
•	G	ABRIELA GONCA	LVEZ	
		Name of Person		
		GABINO CAFE, L	LC	
		Firm/Company	<u></u>	
	7000	BONITA DRIVE, S	STE 510	
		Address		
	MI	AMI BEACH, FL 3	3141	
·		City/State and Zip Code	.	
:	E-mail address:	(to be used for future some	l report notification	
For further information con	cerning this matter, please	call:		
GABRIEL	A GONCALVEZ	at (7/86)	499-	6356
Name of P	erson		de & Daytime Telep	hone Number
Enclosed is a check for the t	following amount:			
\$25.00 Filing Fee [\$30.00 Filing Fee & Certificate of Status	\$55.00 Hiling Fee Certified Copy (additional copy	•	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FI. 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

AMERICAENVIA

(H10000235843)

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

2010 NOV -5 AM 2 25

	SEURLIARY (V. STATE TALLAMASSEE, FLORIDA			
GABINO CANNO	AFE, LLC v as it now appears on our records.)			
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	ability Company)			
The Articles of Organization for this Limited Liability Company	were filed on 07/21/2010 and assigned			
Florida document numberL10000076818				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabi	lity company here:			
The new name must be distinguishable and end with the words "Limit" L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation			
Enter new principal offices address, if applicable:	601 IVES DAIRY RD, STE 401			
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33179			
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
Enternew mailing address, if applicable:	601 IVES DAIRY RD, STE 401			
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33179			
	4			
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here				
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	, Florida			
	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 MGRM = 1	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Maria Alejandra Meana	601 IVES DAIRY RD, STE 401 MIAMI, FL 33179	Add ☐ Remove
MGRM	Mercedes del Carmen Mercino de Meana	601 IVES DAIRY RD, STE 401 MIAMI, FL 33179	Add Remove
			Add Remove
D. If amen	ding any other information, enter change(ZOLONON -2 VI
Dated	November 4 , 2016		25 25
/\	Signature of a member of GABRIE	authorized representative of a member ELA GONCALVEZ printed name of signee	

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Filing Fee: \$25.00