L10000127600

(Re	equestor's Name)	<u> </u>
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
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FILED 11 FEB -1 AM 11: 32 SECRETARY OF STATE SECRETARSEE, FLORIDA

J. BRYAN

FEB - 2 2011

EXAMINER

COVER LETTER

TO:	Registration S Division of Co	Section prporations			
SUBJE	CT:	My E	Beanery LLC		
		Name of Lim	ited Liability Company		
The end	losed Articles o	f Amendment and fee(s) are sul	omitted for filing.		
Please r	eturn all corresp	ondence concerning this matter	to the following:		
			Marc Schulze		
			Name of Person		
	My Beanery LLC			. 	
Firm/Company		 	FE TO TO		
		5741 (Deauville Lake Cir, # F302	•	福福-
Address			333 - <u> </u>		
			Naples, FL 34112		AMII: 32 EE, FLORIO
			City/State and Zip Code		FLO
			arc@schulzestyle.com		RHE 32
		E-mail address: (to be used for future annual report notific	ation)	₽
For furt	her information	concerning this matter, please of	all:		
	N	larc Schulze	at (239) 2	233-0858	
	Name	of Person	Area Code & Daytime	Telephone Number	_
Enclose	d is a check for t	the following amount:			
₹]\$ 25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)		Status &

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

My Beanery 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 ___ 12/14/2010 and assigned L10000127600 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The Bread Haus LLC 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 , Fiorida

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 = Ma MGRM = 1	anager Managing Member		
<u>Title</u>	Name	Address	Type of Action
	·		Add Remove
			Add Remove
	·		Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	-
			11 FEB- SECRETA FALLAHAS
 Dated	January 13 , 20	11	LED AMIIII RRY OF STA SEE, FLOR
		Marc Shilly	32 NDA
	- /	or authorized representative of a member Marc Schulze	
	Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00