L11000111251

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phon	ne #)
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(Document Number)		
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2013 FEB 18 PN 12: 06
SECRETARY OF STATE

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

FORNAX INTERNATIONAL BAKERY, 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:

ANITA TALLO

Name of Person

Firm/Company

19501 WEST COUNTRY CLUB DRV., APT1103

Address

AVENTURA, FL 33180

City/State and Zip Code

TALLOANITA@HOTMAIL.COM

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

For further information concerning this matter, please call:

ANITA TALLO

*..,*305,4**5**04**7**49

Name of Person

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
2013 FEB 18 PH 12: 06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ж.

FORNAX INTERNATIONAL BAKERY, 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 09/28/2011	and assigned
Florida document number L11000111251		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limi" L.L.C."	ted Liability Company," the desig	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	20533 BISCAYNE BLV	'D, SUITE 4-781
(Principal office address MUST BE A STREET ADDRESS)	AVENTURA	
	FL 33180	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:		enter the name of the new
New Registered Office Address:		
	Enter Florida st	reet address
	······································	rida
	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

Title MGR	ANITA TALLO	Address 19501 WEST COUNTRY CLUB DRV., APT 110 AVENTURA, FL 33180	Type of Action Add Remove
MGR	SANDOR VOLFORD	5 E 22ST STREET, 18K NEW YORK, NY 10010	Add Remove
<u></u>			_ Add
			Add Remove
	<u> </u>		Add Remove
			Add Remove

D. If amending any other informati	ion, enter change(s) here: (Attach additional sheets, if necessary.)
, ,	
	•
FEBRUARY 14	, 2013
	Tall Ship
Signa	ature of a member or authorized representative of a member
ANITA TALLO	
	Typed or printed name of signee

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Filing Fee: \$25.00

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SECRETARY OF STATE

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