

L12000011222

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100241798961

11/15/12--01007--009 **55.00

FILED
12 NOV 28 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
NOV 29 2012



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 16, 2012

MAMMAS PIZZA COMPANY LLC
FABIAN RADOSLOVICH
401 W. ATLANTIC AVE. #R11
DELRAY BEACH, FL 33444

SUBJECT: MAMMAS PIZZA COMPANY LLC
Ref. Number: L12000011222

We have received your document for MAMMAS PIZZA COMPANY LLC and your check(s) totaling \$55.00. 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.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 712A00027751

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAMMA'S PIZZA COMPANY 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:

Fabian Radoslovich
Name of Person

Mamma's Pizza Co.
Firm/Company

401 W. Atlantic Ave # R11
Address

Delray Beach, FL 33444
City/State and Zip Code

FABIAN.BEST.2004@GMAIL.COM.
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Fabian Radoslovich at (786) 318-6491
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**

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

FILED
12 NOV 28 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 1/24/2012 and assigned
Florida document number L12000011222

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)

401 W. Atlantic Ave R11
Delray Beach, FL
33444

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

401 W. Atlantic Ave R11
Delray Beach, FL
33444

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:

Fabian Radoslovich

New Registered Office Address:

401 W. Atlantic Ave # R11

Enter Florida street address

Delray Beach, Florida 33444
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

SIGN

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>
MGRM	James Castello	6851 Ashton St.	<input type="checkbox"/> Add
		Boynton Beach, FL	<input checked="" type="checkbox"/> Remove
		33437	
MGRM	Kisha Castello	6851 Ashton St.	<input type="checkbox"/> Add
		Boynton Beach, FL	<input checked="" type="checkbox"/> Remove
		33437	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
MGRM	Fabian Radoslovich	401 W. Atlantic Ave	<input checked="" type="checkbox"/> Add
		# R11	<input type="checkbox"/> Remove
		Delray Beach, FL	
		33444	<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.)

Dated Nov 9th, 2012



— SIGN

Signature of a member or authorized representative of a member

FABIAN L. RADOSLOVICH

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00