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T. HAMPTON

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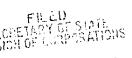
Registration Section

Division of Co	orporations					
SUBJECT:	LA FR	UTERIA, LLC				
	Name of Limited Liability Company					
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.				
Please return all corresp	oondence concerning this matter	to the following:				
	JORG	GE L. GONZALEZ PEREZ				
		Name of Person				
		LA FRUTERIA, LLC				
•	Firm/Company					
	11300 NW 87TH COURT STE 163					
		Address				
	HIALE	HIALEAH GARDENS, FL 33018				
	<u> </u>	City/State and Zip Code				
	E-mail address: (to be used for future annual report noti	fication)			
For further information	concerning this matter, please of	eall:				
	. GONZALEZ PEREZ	at (786)	366-4771			
Name	of Person	Area Code & Daytin	ne 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 enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Regis Divis P.O.	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, FL 32314	STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C	on orations			

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO

ARTICLES OF ORGANIZATION SECRETA



OF

12 OCT -3 PM 2:59

	LA FRUTE	RIA, LLC				
. (<u>Name of the Limited</u> (A	Liability Compa Florida Limited L	<mark>ny as it now appear</mark> Jiability Company)	s on our records.)			
The Articles of Organization for this Limited Li Florida document number L12000083	•	were filed on	10/01/2012	and assigned		
This amendment is submitted to amend the follo	wing:					
A. If amending name, enter the new name of	the limited liab	ility company her	<u>e</u> :			
The new name must be distinguishable and end with "L.L.C."	h the words "Limi	ted Liability Compa	ny," the designation "L	LC" or the abbreviation		
Enter new principal offices address, if applicable:		11300 NW 87TH COURT STE 163				
(Principal office address MUST BE A STREE	HIALEAH GARDENS, FL 33018					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		11300 NW 87TH COURT STE 163 HIALEAH GARDENS, FL 33018				
B. If amending the registered agent and/or the new registered of New Registered Agent:	fice address her			he name of the new		
New Registered Office Address:	441 NW 39TH AVENUE					
		Enter Florida street address				
		MIAMI	, Florida	33126		
		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.

Orge Juis (Janza) es 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 = Manager

MGRM = Managing Member Type of Action Title Name Address **MGRM** JORGE GONZALEZ PERE 441 NW 39TH AVENUE ✓ Add Remove MIAMI_FL 33126 MGRM **ESMIN MATOS** <u>11300 NW 87TH STREET STE 163</u> Add [✓ Remove HIALEAH GARDENS, FL 33018 MGRM BARBARA ORTIZ 11300 NW 87TH COURT STE 163 ☐ Add HIALEAH GARDENS, FL 33018 Remove JASMINE MATOS MGRM 11300 NW 87TH COURT STE 163 Add Remove HIALEAH GARDENS, FL 33018 □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) OCTOBER 1 2012 Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00