

L12000088582

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

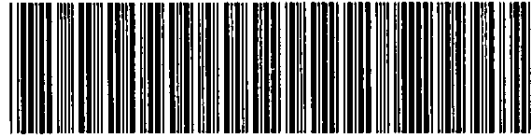
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 12 2013

D. ERUCE

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **JD's Pizzarella 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:

Julio Moreira

Name of Person

JD's Pizzarella LLC

Firm/Company

9548 E. Lake Dr.

Address

Boca Raton Fl. 33434

City/State and Zip Code

juliocsm@hotmail.com

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

For further information concerning this matter, please call:

Julio Moreira

Name of Person

415 420-1086

at ()

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

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TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

JD's Pizzarella 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 July 9, 2012 and assigned
Florida document number L12000088582.

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)

1156 E. Hillsboro Blvd.

Deerfield Bch. Fl. 33441

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1156 E. Hillsboro Blvd.

Deerfield Bch. Fl. 33441

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TALLAHASSEE FLORIDA

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: Julio Moreira

New Registered Office Address: 9548 E. Lake Dr.

Enter Florida street address

Boca Raton, Florida 33434

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 = Manager

MGRM = Managing Member

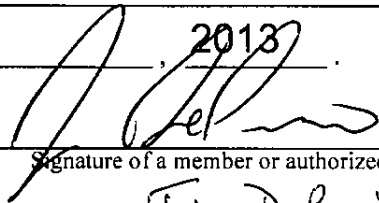
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Nancy DePersio	10519 NW 67thCt.	<input type="checkbox"/> Add
		Parkland, Fl. 33076	<input checked="" type="checkbox"/> Remove
MGRM	Julio Moreira	9548 E. Lake Dr.	<input checked="" type="checkbox"/> Add
		Boca Raton, Fl. 33434	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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TALLAHASSEE FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated September 9

2013



Signature of a member or authorized representative of a member

John DePersio

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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