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COVER LETTER

TO:

Registration Section Division of Corporations

PIPO'S CUBAN BAKERY Y CAFETERIA, LLC

SUBJECT:

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:

YANELYS BASAIL

Name of Person

Firm/Company

402 JOAN AVE N U-6

Address

LEHIGH ACRES FL 33971

City/State and Zip Code

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

For further information concerning this matter, please call:

YANELYS BASAIL

239₃603-1521

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

PIPO'S CUBAN BAKERY Y CAFETERIA, 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 Liabili	ty Company were filed on 03/01/2013	and assigned
Florida document number L13000010381	·	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the de	esignation "LLC" or the abbreviation
Enter new principal offices address, if applicable		- 2
(Principal office address MUST BE A STREET AL	ODRESS)	
		C andu-
		SS OF S
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	2	
	- · · · · · · · · · · · · · · · · · · ·	<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office		ds, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florid	a street address
_	,	Florida
_	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> Address **Type of Action** YANELYS BASAIL 402 JOAN AVE N U-6 **MGR LEHIGH ACRES FL 33971** DAVID GARCIA 3106 13TH ST SW MGR LEHIGH ACRES FL 33976

Remove

D. If amending any other information, ent	er change(s) here: (Attach additional sheets, if necessary.)
	
JUNE 26TH	2013
Bloom	.,
/ Signature of	a member or authorized representative of a member
YANELYS BASAIL	
	Typed or printed name of signee

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Filing Fee: \$25.00

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