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(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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## **COVER LETTER**

TO:	Registration S Division of Co						
CLID III		& CHOCOLATE LLC					
SUBJE	.Cr:	Name of Lin	ited Liability Company				
The end	closed Articles o	of Amendment and fee(s) are sub	omitted for filing.				
Please	return all corresp	pondence concerning this matter	to the following:				
		MISSIVA KHACER, ESC	QUIRE				
		Name of Person					
		M.T.K INTERNATIONAL LAW GROUP					
		Firm/Company					
		1900 N BAYSHORE DRIVE SUITE IA					
		Address					
		MIAMI, FL 33132					
		City/State and Zip Code					
		MKHACER@MTKLAWGROUP.COM  E-mail address: (to be used for future annual report notification)					
For furt	her information	concerning this matter, please c	·	meanony			
		concerning this matter, please e					
MISSI	VA KHACER		331 234.7334 at ()				
	Name	of Person	Area Code Daytin	ie Telephone Number			
Enclose	ed is a check for	the following amount:					
\$25	0.00 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		tration Section	STREET/COUR Registration Section Division of Corpo	on			

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2819 CT. 17 PM 1:32

## BREAD & CHOCOLATE LLC

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

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	LOPERA PABLO	18230 COLLINS AVENUE SUNNY ISLES, FL 33160	
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(If an effe <u>Note:</u>	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated _	SEPTEMBER 8 2019
	Land -
	Signature of a member authorized representative of a member
	MISSIVA KHACER
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00