(Re	equestor's Name)	
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SEP 2 7 2013 D. ETLICE

## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT:	3 NATIVES	S COFFEE SHOP L	LC
	Name of Limit	ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	PHILIP	M. BAMBINO Name of Person	
		TIVES COFFEE SHO	PIIC
	3 1041	Firm/Company	· ac
	18 Pi	NE HILL TRAIL U	DEST PER T
		Address	SEP 2
	<u>  LEQUE</u>	STA FL 33469 City/State and Zip Code	
	PBAM <sup>*</sup> E-mail address: (to	BIND @ AOL. COM  be used for future annual report notificati	AM II: 23 F FLORIDA
For further information c	oncerning this matter, please ca	-	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
PHILIP M.	BAMBINO	at ( <u>561)</u> 301 - 94 Area Code & Daytime Te	48
Ivanic o	reison	Area Code & Dayline Te	acphone number
Enclosed is a check for th	e 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

# 3 NATIVES COFFEE SHOP LLC

(A Florida Limited Lial	oility Company)	rai records.)		
The Articles of Organization for this Limited Liability Company w	ere filed on3	4 2013	and assign	ed
Florida document number <u>L13000032603</u> .				
This amendment is submitted to amend the following:			LALLAN SE	-17
A. If amending name, enter the new name of the limited liability	ty company here:		P 26	CLINES.
N/A			inio 🕦	
The new name must be distinguishable and end with the words "Limited "L.L.C."		_	~ ~ ~	eviation
Enter new principal offices address, if applicable:	18 PINE	HILL TR	ATLINES	ST.
(Principal office address MUST BE A STREET ADDRESS)	TEQUEST	A, FL	33469	
	10 Days	===0	A11	——
Enter new mailing address, if applicable:	18 PINE			21
(Muiling address MAY BE A POST OFFICE BOX)	TEQUES	TA, FL	33469	
Traine of the Wiley Steeles of Figure	ILIP M. BA	AMBINO TRAIL	) WEST	he new
••••		orida street addi		
	NUESTA- City	, Florida	Zip Code	<u>l</u>
New Registered Agent's Signature, if changing Registered Agent:	Cuy		Lip Coue	

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 a directly aponfirm that the limited liability company has been notified in writing of this change.

Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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> **Name** Address Type of Action JUSTIN M. WELFELD ZO E. BEUERLY RD MGR JUPITER, FL 33469 X Remove PHILIP M. BAMBINO 18 PINE HILLTRAIL X Add MGR TEQUESTA, FL 33469[ Remove Remove Remove

. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ted	AUGUST 21st 2013.
	$\otimes$
	Signature of a member or authorized representative of a member
	'ANTHONY M. BAMBIND
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

FILED

ME SEP 26 AM II: 23

SECRETARY OF STATE
PALLAHASSEE FLORIDA