L13000074019

| (Req | uestor's Name) | | |
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| (Add | ress) | | |
| (Add | ress) | | |
| (City | /State/Zip/Phon | e #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Bus | iness Entity Nar | ne) | |
| (Document Number) | | | |
| Certified Copies | Certificates | s of Status | |
| Special Instructions to F | iling Officer: | | |
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Office Use Only



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SECRETARY OF STATE AND ANASSEF, FLORIDA

JUL 2 2 2013

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECTS

Belgian Deli Waffle, 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:

Jean-Luc Bourgeois or Oscar Hilderson

Name of Person

Belgian Deli Waffle, LLC

Firm/Company

2388 Zeder Avenue

Address

Delray Beach, Florida 33444

City/State and Zip Code

Deliwaffle2013@gmail.com

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

For further information concerning this matter, please call:

Oscar Hilderson

.__ .

561 860-2256

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 ARTICLES OF ORGANIZATION **OF**

| Belgian Deli Waffle, LLC | | | | | |
|------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------|--------------------------|----------------------|-------------|
| (Name of the Limited | Liability Compa Florida Limited | ny as it now appears on Liability Company) | our records.) | | |
| The Articles of Organization for this Limited Li | ability Company | were filed on <u>5/21/2</u> | 013 | _and assign | ed |
| Florida document number <u>L1300007401</u> | | | | | |
| This amendment is submitted to amend the following | wing: | | | | |
| A. If amending name, enter the new name of | the limited lial | oility company bere: | | | |
| n/a | | | | | |
| The new name must be distinguishable and end with "L.L.C." | the words "Lim | ited Liability Company," | the designation "LLC | " or the abbr | eviation |
| Enter new principal offices address, if applies | able: | n/a | | | |
| (Principal office address MUST BE A STREE | T ADDRESS) | |) r | | |
| | | | | | 1500 |
| | | | Č | | |
| Eater new mailing address, if applicable: | | n/a | r | ή≺ υ 10π – | |
| (Mailing address MAY BE A POST OFFICE | B <i>OX</i>) | | • | T (1) | ~ |
| | | | | | |
| | | | | φ (F) | |
| B. If amending the registered agent and/or registered agent and/or the new registered of | r registered o fice address her | ffice address on our s re: | ecords, <u>enter the</u> | name of the | he new |
| Name of New Registered Agent: | n/a | | | | |
| New Registered Office Address: | | | | | |
| | | Enter F | lorida street addres | 3 | _ |
| | | , Florida | | | |
| | | City | | Zip Code | |
| New Registered Agent's Signature, if changing R | egistered Agent | L | | | |

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.

Page 1 of 3

f 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 |
|--------------|-----------------|------------------------|----------------|
| MGRM | Oscar Hilderson | 2388 Zeder Avenue | Add |
| | | Delray Beach, Fl 33444 | Remove |
| | | | Add |
| A | | A C P | Add 28 Remove |
| | | 77 | Remove |
| | | | Add |
| | | | |
| | | | Remove |

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| formation, enter change(s) bere: (Attach additional sheets, if necessar | <i>(</i> .v.) |
|-------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| | |
| | |
| 2013 | |
| | |
| Signature of a member or authorized representative of a member ourgeois, Owner - Director | |
| | 2013 Signature of a member or authorized representative of a member |

Page 3 of 3

Filing Fee: \$25.00

2013 JUL 19 AMÍ!: 19 SECRETARY OF STATE TALLAHASSEE, FLORIBA

