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(Re	questor's Name)	
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(C:	(Chaha (Zin (Diana	- 40
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

B. BÖSTICK
JUN 2 6 2013
EXAMINER

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

Change Company Name and Records

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:

Klauss Pimienta			
Name of Person	_		
Firm/Company	_		
1750 W 46TH ST APT 409			
Address	_		
MIAMI, FL 33012	SE	2013 JUN 25	
City/State and Zip Code	- [At	<u>~</u>	
kp@theespressoboutique.com	3	¥2.	•
E-mail address: (to be used for future annual report notification)	- ASSE	25	
For further information concerning this matter, please call:	frax	2	[T]
Klauss Pimienta 786,518-0277		AH 10: 5	

Enclosed is a check for the following amount:

Name of Person

■ \$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:

Area Code & Daytime Telephone Number

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

KAFFEINE COFFEE COMPANY LLC

(Name of the Limited L (A F	lorida Limited L	ny as it now appears on our liability Company)	records.)		
The Articles of Organization for this Limited Liab Florida document number <u>L13000084001</u>	pility Company	were filed on 06/11/20	and assigned		
This amendment is submitted to amend the follow	/ing:				
A. If amending name, enter the new name of t	<u>he limited liab</u>	ility company here:			
THE ESPRESSO BOUTIQUE COM	IPANY LLC	;			
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Company," the c	lesignation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:		1750 W 46th ST APT 409			
(Principal office address MUST BE A STREET ADDRESS)		MIAMI, FL 33012	2013 ALL		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Be	<u>0X)</u>	1750 W 46th ST A	APT 409 EEE BY O		
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent: New Registered Office Address:	ce address here	e: 6th ST APT 409	rds, enter the name of the new		
MIAMI			, Florida <u>33012</u>		
		City	Zip Code		
New Registered Agent's Signature, if changing Registered	gistered 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 = Ma MGRM = N	nager Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add
			Remove
			Add
			Remove
			-
			ZE CRECKE Add Add
			Add Add Remove
			Remove
			95 0 0
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Page 3 of 3

Filing Fee: \$25.00

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