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2010 OCT 18 PM 2: 36 Secretary of State

Office Use Only

TO: **Registration Section Division of Corporations**

Mario & Patricia 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:

MARIO D. STRACLI JR.

Name of Person CREF MARCIOS CAFE
Firm/Company 1437 HighLANDL AVE ME L Bouinne FL 32935
City/State and 7in Code MSTRA4 197 @ G-MAIL. COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MAIRIO STRAGY at 832, 474-7633

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

FILED 2013 OCT 18 PM 2: 36

SLUNCTARY OF STATE TALLAHASSEE, FLORIDA

Mario + Patricia, 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 Liability Company were filed on $8-30-2013$ and assigned Florida document number $\frac{2/3000/22883}{}$
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" or the abbreviation" (LLC" or
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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
MGR	MARIO O. STRALL'IR	151 SW 134 WAX	Add
		Apt N-109	Remove
		Peubroke PiNES, FL 3302	27
MGRM	MARIO D. STRACK IR.	SAME AS A BOUE	_ Add
			Remove
			_
MGRM	NANCY P. STRADI	1755 CRESCENT PLAZA OF	2. Add
		HOUSTON, TX 77077	Remove
MGR	NANCY P. STRAGE	SAME AS ABOUE	Add
			Remove
			Add
			Remove
			Add
			Remove

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ber 11,	, 2013	<u>3</u> .		
Ma	me is P.	Strucci		
Signa	ture of a member or	authorized representati	ve of a member	
	Typed or	printed name of signee	7+04	
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Page 3 of 3

Filing Fee: \$25.00

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