

# L13000171152

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

130078

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## To:

Division of Corporations  
Fax Number : (850) 617-6383

## From:

Account Name : CORP USA  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
WYNWOOD DINER LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
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K. SALY

SEP 26 2017

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9/25/2017

2017 SEP 25 PM 4:40

2017 SEP 25 PM 4:40

2017 SEP 25 AM 11:10

2017 SEP 25 AM 11:10

FILED

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: WYNWOOD DINER 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 ALONSO

Name of Person

WYNWOOD DINER LLC

Firm/Company

2601 NW 2ND AVE

Address

MIAMI, FL 33127

City/State and Zip Code

alonso\_davila@hotmail.com

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

For further information concerning this matter, please call:

SAMUEL RUBERT

305 791-4199  
at ( )

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

WYNWOOD DINER LLC

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

FILED  
2017 SEP 25 AM 11:10  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 12/11/2013 and assigned  
Florida document number L13000171152

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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*

\_\_\_\_\_  
City Florida

\_\_\_\_\_  
City

\_\_\_\_\_  
Zip Code

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	JERONIMO HIRSCHFELD	2601 NW 2ND AVE	<input type="checkbox"/> Add
		MIAMI, FL 33127	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	INAKE NEGRETE	2601 NW 2ND AVE	<input type="checkbox"/> Add
		MIAMI, FL 33127	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MARIO ALONSO	2601 NW 2ND AVE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33127	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED  
2017 SEP 25 AM 11:10  
CLERK OF COURT  
JANET M. STANTON

[illegible]

FILED  
2011 SEP 25 AM 11:11  
FBI - NEW YORK  
RECEIVED  
SEP 25 2011  
FBI - NEW YORK

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

201

Signature of a member or authorized representative of a member

MARIO ALONSO

Typed or printed name of signee