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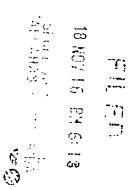
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COVER LETTER

TO:	Registration Sec Division of Corp			
a		Dolai	Store 1 LLC	
SUBJE	CT:		ted Liability Company	
The en	closed Anicles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspon	dence concerning this matter	to the following:	
		N	Vatalie Jepes	
		-	Name of Person	
)olci Sture 1 Lu	
		<u>-</u>	Firm/Company	
		175	SW 7th St #	1524
			Address	1301
		M	1991 Fl 33130 City/State and Zip Code 5 dol apeccatia	
		2,10	City/State and Zip Code	
		E-mail address: (t	to be used for future annual report note:	Gancial Com
For fur	ther information co	ncerning this matter, please ca	ill:	
	Natal	1.	at (954) 632 8 Area Code Daytim	551
	Name of	Person	Area Code Daytime	e Telephone Number
Enclose	ed is a check for the	c following amount:		
图 \$2:	5.00 Filing Fee	□ \$30.00 Filing Fee & Centificate 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

Dolci Store 1	ILC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company Florida document numberL1410000 73405	were filed on5/06/14a	nd assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviate	ion "L.L.C."
Enter new principal offices address, if applicable:	175 SW 7th St # 152 Miami Fl 33130	24
(Principal office address MUST BE A STREET ADDRESS)	Mani, Fl 33130	
Enter new mailing address, if applicable:	175 SW 7th S1 # 15 Miam . Fl 33130	24
(Mailing address MAY BE A POST OFFICE BOX)	Miam, Fl. 33130	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:		ame of the new
New Registered Office Address:	Enter Florida street address	-D -
	Florida 1754	د. ئن سم
	City Florida Zip	Čode

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>	Address	Type of Action
MGR	Henry Espejo	175 SW 7th St #1524 Miam, th 33130	E Add
	V	Miami, Fl 33130	□ Remove
			🗆 Change
			□ Remove
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	(2)
ctive date, if other than the date of filing:	(optional)
effective date is listed, the date must be specific and cannot be prior to date of filing or If the date inserted in this block does not meet the applicable statutory filing	more than 90 days after filing.) Pursuant to 605.02
iment's effective date on the Department of State's records.	ing requirements, this date will not be fisted a
ecord specifies a delayed effective date, but not an effective ne 90th day after the record is filed.	e time, at 12:01 a.m. on the earlier
†	
a 11/6/18	
calato la chana	2_
Signature of a member or authorized representative	<u> </u>

Page 3 of 3

Filing Fee: \$25.00