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B. BOSTICK
MAY 2 9 2014
EXAMINER

COVER LETTER

TO:	Registration S Division of Co				••
SUBJE	ECT:	HILANI GI	ELATERIA F	PANCHIS	SING LLC
		Name of	Limited Liability Company		
The en	closed Articles o	of Amendment and fee(s) are	submitted for filing.		
Please	return all corres _l	pondence concerning this ma	tter to the following:		
		FRAM	CESCO PAS Name of Person	AUSE	
			Name of Ferson		
			Firm/Company		
		436 69	Address	.4	
		MiAMI F	BEACH - FC	33(39	
		J. P. Samuel address	SEACH - FC City/State and Zip C SQUA B 4 2 2 ss: (to be used for future an	ode mail.com	(dian)
For fur	ther information	concerning this matter, pleas		ndar report nource	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
7.	- 2ANCE8CC	PASQUA	at (<u>3<i>9</i>\$)</u> Area Code	992 82	
	Name	of Person	Area Code	Daytime T	'elephone Number ,
Enclose	ed is a check for	the following amount:			
\$2:	5.00 Filing Fec	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing For Certified Copy (additional copy)	У	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Regis Divis	LING ADDRESS: stration Section sion of Corporations Box 6327	Regi Divi	EET/COURIEI stration Section sion of Corporati on Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MILANI GELAT	TERIA FRANCHISING LLC
(<u>Name of the Limited Liability</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co	ompany were filed on $\frac{5/12/14}{}$ and assigned
Florida document number <u>L14 00 00 78895</u>	_·
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ted liability company here:
The new name must be distinguishable and end with the words "Lim	nited 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 ADDR.	ESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr	tered office address on our records, enter the name of the new ress here:
Name of New Registered Agent:	
Traine of their Registered . Igent.	
New Registered Office Address:	Enter Florida street address
	Enter Florida street address, Florida

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

Page 1 of 3

n amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = 'Ma AMBR = Au	nnager ithorized Member		•	
<u>Title</u>	<u>Name</u>		Address	Type of Action
MGR	FRANCESCO	PASOUA	436 ESPANOLA WAY-33139 MIAHI BEDCH - YC	Add
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Page 3 of 3

Filing Fee: \$25.00