114000095624

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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October 18, 2016

ZULLY MARTINEZ 3792 10TH AVE N PALM SPRINGS, FL 33461

SUBJECT: CHAPINES BAKERY LLC

Ref. Number: L14000095624

We have received your document for CHAPINES BAKERY LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your entity was administratively dissolved or its certificate of authority was revoked for failure to file the annual report/uniform business report as required by law. To reinstate this entity complete the enclosed application/report form.

The above referenced mark expired on September 23, 2016. Please resubmit your filing in the form of a new mark application. We are enclosing the form and instructions for your convenience.

COVER LETTER

TO: Rep	gistration Sect vision of Corp	tion orations		
CVIDATECT		BAKERY LLC		
SUBJECT:		Name of Limit	ed Liability Company	
		mendment and fee(s) are subm		
		ZULLY MARTINEZ		
			Name of Person	
		CHAPINES BAKERY LLC		
			Firm/Company	
		3792 10TH AVE N		
		. 100	Address	
		PALM SPRINGS FL 33461		
			City/State and Zip Code	
		E-mail address: (to	be used for future annual report notifica	tion)
For further i	nformation co	ncerning this matter, please cal	11:	
ZULLY MA	ARTINEZ		732 397-8466 at ()	
	Name of	Person	at ()	elephone Number
Enclosed is	a check for the	e 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

CHAPINES BAKERY LLC		
(<u>Name of the Limited Liability</u> (A Florida l	Company as it now appears on our red Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability Co	ompany were filed on $\frac{06/16/2014}{}$	and assigned
Florida document number L14000095624	'	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
CHAPINES BAKERY INTERNATIONAL LLC		
The new name must be distinguishable and contain the words "Limite	ed 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 ADDRE	ESS)	
		, •,
Enter new mailing address, if applicable:		333
(Mailing address MAY BE A POST OFFICE BOX)		
		STA LOR
B. If amending the registered agent and/or register		ords, enter the name of the new
registered agent and/or the new registered office addre	ess nere:	
Name of New Registered Agent:		
Nume of New Registered Agent.		
New Registered Office Address:	D . E/	
	Enter Florida street add	dress
		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>	Address	Type of Action
SECRET.	NOE ADAN MONTEROS MORA	3792 10TH AVE N	⊒ Add
		PALM SPRINGS FL 33461	D P
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OF GRAIN PRODUCTS FOR BAH	KERY AND DISTRIBUTION TO COUNTRIES THE	ROUGHOUT LATIN
AMERICA.		
	<u> </u>	
	09/19/2016	
ctive date, if other than the date of effective date is listed, the date must be spe	ecific and cannot be prior to date of filing or more than 90 day	(optional) vs after filing.) Pursuant to 605.02
: If the date inserted in this block do ment's effective date on the Departm	es not meet the applicable statutory filing requirement ent of State's records.	is, this date will not be listed a
ecord specifies a delayed effect e 90th day after the record is	ctive date, but not an effective time, at 12 sfiled.	:01 a.m. on the earlier
, 09/22	2016	
d		()
(www. Elinas)		
Signatu	ire of a member or authorized representative of a member	ARY O

Page 3 of 3

Filing Fee: \$25.00