8/3/2016

Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000188162 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146

Phone Fax Number

: (305)444-4994 : (305)444-4977

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

Emoil	Address:			
FINGTE	Mudi Essi			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ARCHETTI'S LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

S Warren SEP 04 2016

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears (A Florida Limited Liability Company)	7-1-1-1-7			
	(Oil Out Lection?)		•	-
The Articles of Organization for this Limited Liability Company were filed on $\frac{07\%}{2}$	29/16		and	assigned
Florida document number L14000096127				
This amendment is submitted to amend the following:				
4. If amending name, enter the new name of the limited liability company her	<u>re</u> ;			
MARMELLATA BAKERY LLC				
he new name must be distinguishable and contain the words "Limited Liability Company," the de-	signation "LLC" or	7,1		"L.L.C."
inter new principal offices address, if applicable:	ļ	C.	ura	77
Principal office address MUST BE A STREET ADDRESS)	,A ¹	zří	(3)	
		777	<u>.</u>	H H
			\triangleright	111
Enter new mailing address, if applicable:	<u></u>	<u> </u>	, -	<u>ں</u>
Malling address MAY BE A POST OFFICE BOX)	 	SE .	۳۳ سالتا	
		D.M.	0	

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 505, 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

Title	Name	Address	Type of Action
MOR	GABRIELA M TAVARES	465 BRICKELL AV	= Add
		SUITE 4506	□ Remove
		MIAMI FLORIDA 33131	□ Change
			☐ Remove
			Change
			D Add
			□ Remove
•	·	Age	□ Change
			Ādd
			Remove
			☐ Change
	· ·	•	
			🗀 Remove
		7 - 5-4 7 - 7-7 7 -	Change Add
			₩ Remove
		OF SIAIL	Change
	•	Ģr.	L 🛱

Page 2 of 3

•		
	•	1
	01/29/16	
flective date, if other than 'm effective date is listed, the date	the date of filing: and be specific and cannot be prior to date of filing or	(optional) more than 90 days after fling.) Pursuant to 605.020
ote: If the date inserted in the comment's offective date on it record specifies a defa	is block does not meet the applicable statutory file Department of State's records. I was effective date, but not an effective	ling requirements, this date will not be listed a
ote: If the date inscreed in the comment's offective date on it record specifies a defathe 90th day after the	is block does not meet the applicable statutory file Department of State's records. I was effective date, but not an effective	ling requirements, this date will not be listed a
ote: If the date inscreed in the comment's offective date on it record specifies a defathe 90th day after the	is block does not meet the applicable statutory file Department of State's records. I yed effective date, but not an effective record is filed.	ling requirements, this date will not be listed a
ote: If the date inscreed in the comment's offective date on it record specifies a defathe 90th day after the	is block does not meet the applicable statutory file Department of State's records. I yed effective date, but not an effective record is filed.	ting requirements, this date will not be listed as time, at 12:01 s.m. on the earlier of
ote: If the date inscreed in the comment's offective date on it record specifies a defathe 90th day after the	is block does not meet the applicable statutory file Department of State's records. Typed effective date, but not an effective record is filed. 2016 Signature of a member or authorized represented.	time, at 12:01 a.m. on the earlier of the of a member
ote: If the date inserted in the poumers's offective date on the record specifies a defaulth 90th day after the ated JULY 29	is block does not meet the applicable statutory file Department of State's records. Typed effective date, but not an effective record is filed. 2016 Signature of a member or authorized represented	time, at 12:01 a.m. on the earlier of
lote: If the date inserted in the ocument's offective date on the record specifies a defaulth and specifies a defaulth an	is block does not meet the applicable statutory file Department of State's records. Typed effective date, but not an effective record is filed. 2016 Signature of a member or authorized represented.	time, at 12:01 s.m. on the earlier of