

L14000112825

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

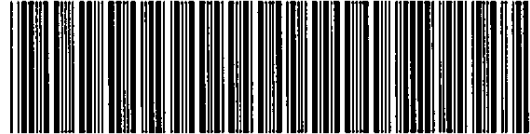
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600286559466

06/07/16--01020--015 **\$0.00

FILED
16 JUN -7 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 14 2016

Y SULKER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 7 Mile Pizzeria 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:

Richard Herrera Cabello

Name of Person

7 Mile Pizzeria LLC

Firm/Company

2264 Overseas Hwy

Address

Marathon, FL 33050

City/State and Zip Code

jcmarservices@yahoo.com

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

For further information concerning this matter, please call:

Angel Cabrera

305 942-6953
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

7 Mile Pizzeria LLC

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

The Articles of Organization for this Limited Liability Company were filed on 07/17/2014 and assigned
Florida document number L 14000112825.

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:

Richard Herrera Cabello

New Registered Office Address:

590 E 8TH avenue

Enter Florida street address

Hialeah

Florida 33010

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	Angel Cabrera	451 64th Street Ocean	<input type="checkbox"/> Add
		Marathon, FL 33050	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Richard Herrera Cabello	590 E 8th Avenue	<input checked="" type="checkbox"/> Add
		Hialeah, FL 33010	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Katia Santos	590 E 8th Avenue	<input checked="" type="checkbox"/> Add
		Hialeah, FL 33010	<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
16 JUN - 7 PM 3:07
TALLAHASSEE, FLORIDA

19 JUN - 1 PM 3:44
STORY LINE OF
TALLAHASSEE, FLORIDA


FILED
16 JUN -7 PM 3:44
SECRETARY of State
TALLAHASSEE, FLORIDA

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

Dated _____, _____.


Signature of a member

Signature of a member or authorized representative of a member

Richard Herrera Cabello

Typed or printed name of signee