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J. HARRIS

COVER LETTER

Division of Co		
7 MILE P.	PIZZERIA LLC	
JODGECT,	Name of Limited Liability Company	-
	of Amendment and fee(s) are submitted for filing.	
Please return all corresp	spondence concerning this matter to the following:	
	ANDRES AVILA	
	Name of Person	
	SPARE SOLUTIONS INC	•
	Firm/Company	
	4711 NW 79 AVE SUITE 4D	
	Address	
	DORAL FLORIDA 33166	
	City/State and Zip Code	
	AAVILA2@HOTMAIL.COM E-mail address: (to be used for future annual report notification)	_
For further information	n concerning this matter, please call:	
ANDRES AVILA	786 277-2308 at ()	
Name	at () e of Person Area Code Daytime Telephone Num	ber
Enclosed is a check for	the following amount:	
□ \$25.00 Filing Fee	Certificate of Status Certified Copy Certificate of Status Certified Copy Certificate of Status Certified Copy (additional copy is enclosed) Certificate of Status	Filing Fee, icate of Status & ied Copy nal 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 Lim	ited Liability Comp (A Florida Limited	any as it now appears of Liability Company)	n our records.				
The Articles of Organization for this Limited Liability Company were filed on 07/17/2			<u>//2014</u>	and as	and assigned		
Florida document number L14000112825	 •						
This amendment is submitted to amend the fol	lowing:						
A. If amending name, enter the new name	of the limited lial	oility company here	2:				
The new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the desi	gnation "LLC" or th	e abbreviation "L	L.C."		
Enter new principal offices address, if appli	cable:				 =		
(Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				ALE SE			
		2264 OVERSEAS	HWY	CRETAR CHETAR			
		MARATHON, FL	ORIDA 33050	EE S			
B. If amending the registered agent and registered agent and/or the new registered of	l/or registered o	ffice address on o e:	our records, <u>ent</u>	<u> </u>	of the nev		
Name of New Registered Agent: CARLOS M GA		ARCIA					
New Registered Office Address:	2264 OVERSE						
		Enter Florida	n street address				
	MARATHON		, Florida	33050			
	 	City		Zip Code			
New Registered Agent's Signature, if changing	Registered Agent:	<u>.</u>					

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.

> Agent, Signature of New Registered Agent If Changing Registry

Page 1 of 3

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>	Type of Action
MGR	RICHARD HERRERA CABELLO	2770 W 61 PL	
		HIALEAH FL 33016	■ Remove
			Change
MGR	CARLOS MANUEL GARCIA	10877 6TH AVE GULF	Add
,		MARATHON FLORIDA 33050	Remove
		<u>.</u>	□ Change
		, ;	- Add
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	90th day after the re								
Dated _	MARCH 30	,	2017					,	
	- J	Signature of a mer	nher or authorized rem	resentative of a member	-	SECR ALLA	2017 MA	-11	J:
	, RICHARD HERRERA				•	E TARN HASSI	1 1 AV		1
		Ту	ped or printed name o	f signee		FE FLO	AH IO:		•,
			Page 3 of 3			RATE OF	: ::3	There is a second	

Filing Fee: \$25.00