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TALLABASSES FINALES

DEC 01 2015 S. YOUNG

COVER LETTER *

TO:	Registration Se Division of Cor				
SUBJE		CUBAN CAFE LLC			
SUBJE	C1;	Name of Lim	ited Liability Company		
		,			
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing		
			_		
Please r	eturn all correspo	endence concerning this matter	to the following:		
		MADELAYDIS PENA PE	EREZ		
Name of Person					
EL PRADO CUBAN CAFE LLC					
Firm/Company					
1400 S MAIN STREET					
		· · · · · · · · · · · · · · · · · · ·	Address	7 SS 55	
		BELLE GLADE, FL 3343	0	NE CRE	70
			City/State and Zip Code	TARY MASSE	FILED
·		E-mail address: (to be used for future annual report noti	fication) in S	
For furtl	her information c	oncerning this matter, please c	all:	fication) FLORIDE	n.
MADE	LAYDIS PENA I	PERES	561 951-3497	, , , o	5
	Name o	f Person	Area Code Daytim	e Telephone Number	
Enclose	d is a check for th	ne 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 enclo	
	Registr Divisio P.O. Bo	ation Section on of Corporations ox 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EL PRADO CUBAN CAFE LLC	
(<u>Name of the Limited Liability Com</u> (A Florida Limite	npany as it now appears on our records.) ed Liability Company)
The Articles of Organization for this Limited Liability Compare Florida document number L14000170296	ny were filed on 11/03/2014 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	ability company here:
The new name must be distinguishable and contain the words "Limited Lia	ability 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 registered agent and/or the new registered office address here	office address on our records, enterptic name of the nevere:
Name of New Registered Agent:	
New Registered Office Address:	~
New Registered Office Address.	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>nt:</u>
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	s provided for in Chapter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

MGR = M	lanager		
	uthorized Member		m
<u> Fitle</u>	<u>Name</u>	Address	Type of Action
AMBR	DAMARIS FERNANDEZ ROSAL	1625 NW 12TH DR	
	:	BELLE GLADE, FL 33430	■ Remove
			☐ Change
AMBR	MADELAYDIS PENA PEREZ	4149 N HAVERHILL RD APT 161	B Add
		WEST PALM BEACH, FL 33417	□ Remove
	•,		☐ Change
	·		
	•		Remove
	4		NOVEN E
	:		PA PAND
	; ·		ORIDA SERemove
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. It amending any other ini	formation, enter change(s) here: (Attach additional sheets, if n	ecessary.)		
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Note: If the date inserted in	an the date of filing:	tional); ter filing; Pi lhis decewi	ursuant to 6 Il piot be li) 05.0207 (3 sted as th
the record specifies a de) The 90th day after th	elayed effective date, but not an effective time, at 12:0 e record is filed.	a.m. on	the ear	lier of:
Dated OCTUBER 20				
	Signature of a member or authorized representative of a member			
t	MADELAYDIS PENA PEREZ	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	Typed or printed name of signee	-		

Page 3 of 3

Filing Fee: \$25.00