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COVER LETTER

Fax: +1 (850) 6176383

TO: Registration Section Division of Corporations

From: MG ENTERPISE Gro Fax: (800) 764-6092

HOLLYEOOD STORE & BEVERAGE LLC

SUBJECT:

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:

BERNARDO JAVIER

Name of Person

HOLLYWOOD FOOD STORE AND BEVERAGE LLC

Firm/Company

2514 HOLLYWOOD BLVD STE 305

To:

Address

HOLLYWOOD FL 33020

□ \$30.00 Filing Fee &

Certificate of Status

City/State and Zip Code

CONTACT@MGMERCHANTSERVICES.COM E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARILYN ALONSO 305 222-1960 at (_____) Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

 \$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

IG ENTERPISE Gro Fax: (800) 764-6092	Το:	Fax: +1 (850) 6176383		2/02/2016 5:30 PM	
		AMENDMENT	,		
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		ORGANIZATIO			
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HOLLYWOOD FOOD	STORE & BEVERAGE LL		00000		
	of the Limited Linbility Comp (A Florida Limited	•	our records.)	<u> </u>	
· · ·	(A Florida Limited	Lindinty Company)			
The Articles of Organization for this	Limited Liability Company	y were filed on $\frac{11/04/2}{2}$	014	and assign	ed
Florida document number 1.14000171	1856				
				•	
This amendment is submitted to ame	nd the following:				
A. If amending name, enter the ne	w name of the limited liab	<u>bility company here</u> :			
HOLLYWOOD FOOD STORE AND E	BEVERAGE LLC	,		1	
The new name must be distinguishable and c	contain the words "Limited Liab	ility Company," the designation	ation "LLC" or the ab	breviation 25 L.C.	"
Enter new principal offices address	s, if applicable:			R	• ,•
(Principal office address MUST BE	A STREET ADDRESS)			1	-
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Enter new mailing address, if appli	icable:	۰ 		ي ب	•
(Mailing address MAY BE A POST				03	
		·			
B. If amending the registered a			records, enter	<u>tlie name of (</u>	he
registered agent and/br the new reg	<u>gistered office address her</u>	<u>re</u> :			
Name of New Registered A	gent:	<u> </u>		<u> </u>	
New Registered Office Add	<u></u>				
		Enter Florida str	eet address		
· .	· · · · · · · · · · · · · · · · · · ·	- City	, Florida	Zip Code	

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

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: . .

Title	Name	Address	Type of Action
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		•	🖸 Remove
		·	Change
			🖸 Add
			Remove
			Change
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E. Effec	tive date, if a	ther than	the date	of filing: _				(option:	il) ng.) Pursuant to 60	

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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 DECEMBER 2	2016	
	Signature of member or authorized representative or anethor	
YOLY RENGIFO		DEC
	Typed or printed name of signee	S ST
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	Filing Fee: \$25.00	: 03