## 14000195883

(F	Requestor's Name)	
	Address)	
(A	Address)	
(0	City/State/Zip/Phone #	)
PICK-UP	WAIT	MAIL
(E	Business Entity Name	)
<u> </u>	Document Number)	
Certified Copies	Certificates o	f Status
Special Instructions t	to Filing Officer:	
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OLVISION OF CORPORATION

M. MILLIGAN OCT 1 2 2017

## **COVER LETTER**

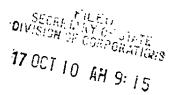
	gistration Sec vision of Corp		·	•
· eun aren	Nani Sweets	LLC		
SUBJECT			ited Liability Company	
The enclose	ed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspon	dence concerning this matter	to the following:	
		Calixto Orta		
		***************************************	Name of Person	····
		Nani Sweets LLC		
			Firm/Company	
		8004 NW 154 Street, #198		
			Address	·
		Miami Lakes, FL 33016		
		<del>-</del>	City/State and Zip Code	<u> </u>
		cookies@bignani.com		
			to be used for future annual rep	ort notification)
For further	information co	ncerning this matter, please co	all:	
Calixto Ort	a		305 793-1 at ()	
	Name of	Person	Area Code	Daytime Telephone Number
Enclosed is	a check for the	following amount:		
\$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	S60.00 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



Nani Sweets 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 v	cere filed on 12	2/29/2014	and assigned
Florida document number L14000195883				
This amendment is submitted to amend the following:	:			
A. If amending name, enter the new name of the lin	imited liabil	ity company h	<u>ere</u> :	
The new name must be distinguishable and contain the words "L	imited Liabilit	y Company," the	designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADI	<u>DRESS)</u>			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad Name of New Registered Agent:			n our records,	enter the name of the new
New Registered Office Address:				
			orida street address	
		City	, Flo	rida
New Registered Agent's Signature, if changing Register	red Agent:	·		•
I hereby accept the appointment as registered agen provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the registe company has been notified in writing of this change	l complete p l'agent as pr vred office a	erformance o, ovided for in	f my duties, and Chapter 605, F	I I am familiar with and .S. Or, if this document is
	If Chang	ing Registered A	gent, 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	<u>Name</u>	Address	Type of Action
AMBR	Calixto Orta	8004 NW 154 Street #198	
		Miami Lakes, FL 33016	Remove
			Change
AMBR	Elisa Orta	8004 NW 154 Street #198	<b>⊟</b> Add
		Miami Lakes, FL 33016	□ Remove
			□ Change
		·	
			□ Remove
			Change
			Add
			□ Remove
			Change
			Remove
			☐ Change
			☐ Remove
			□ Change

Calixto Orta	Signature of a member or au	nthorized representative of a r	nember	OH OF CART
ited 10/5/2017	<u> </u>	A)		อเพีรเอีย 17 00
record specifies a delaye The 90th day after the re		not an effective time,	at 12:01 a.m. on t	he earlier of
fective date, if other than the in effective date is listed, the date mote: If the date inserted in this becament's effective date on the I	lock does not meet the app	licable statutory filing requ	(optional) an 90 days after filing.) Purs uirements, this date will t	uant to 605.0207 not be listed as
				*
				<del>_</del>

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Filing Fee: \$25.00