L15000009503

(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

700289730587

09/06/16--01031--025 **25.00

FILED
2016 SEP 26 P 6:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
SEP 28 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 9, 2016

2016 SEP 26 PM 4:51

MAIBILYN MORAN GUAREGUA
13306 GLACIER NATIONAL DR APT 6404
ORLANDO, FL 32837

SUBJECT: DELICIOUS BROTHER LLC
Ref. Number: L15000009503

We have received your document for DELICIOUS BROTHER LLC and your check(s) totaling $25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 616A00019223

FILED
2016 SEP 26 P 4:51
TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: DELICIOUS BROTHER 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:

MAIBILYN MORAN GUAREGUA
Name of Person

DELICIOUS BROTHER LLC
Firm/Company

13306 GLACIER NATIONAL DR APT 6404
Address

ORLANDO, FL 32837
City/State and Zip Code

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

FILED
2016 SEP 26 P 6:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

MAIBILYN MORAN GUAREGUA at (407) 705-9649
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 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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

DELICIOUS BROTHER 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 1/15/2015 and assigned Florida document number L15000009503.

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)

13306 GLACIER NATIONAL DR.
APT. 6404
ORLANDO, FL 32837

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

13306 GLACIER NATIONAL DR
APT 6404
ORLANDO, FL 32837

FILED
2016 SEP 26 P 6:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: MAIBILYN MORAN GUAREGUA

New Registered Office Address: 13306 GLACIER NATIONAL DR. APT 6404
Enter Florida street address

ORLANDO, **Florida** 32837
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

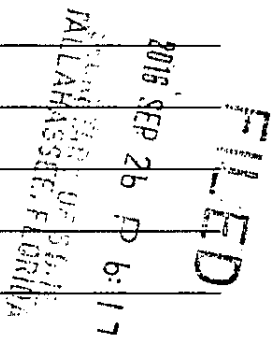
- **If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:**

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	OMJ ENTERPRISE LLC	1307 IVY MEADOW DR	☐ Add
		ORLANDO, FL 32824	■ Remove
			☐ Change
MGR	YOELKYS ESQUIVEL	13306 EMERALD COAST DR	■ Add
		APT 302	☐ Remove
		ORLANDO, FL 32824	☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

2016 SEP 26 P 6:17
TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*



E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 SEPTEMBER 1ST, 2016.

Signature of a member or authorized representative of a member

Maibilyn J. Moran G.
Typed or printed name of signee

Filing Fee: $25.00