

2015-08-24

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L15000038864

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : GREEN AND KAHN P.L.  
Account Number : 120120000022  
Phone : (305) 865-4311  
Fax Number : (305) 865-9688

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: DANREALTY@GMAIL.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
ACES JUICE BAR LLC

Certificate of Status	1
Certified Copy	1
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TO  
ARTICLES OF ORGANIZATION  
OF

Aces Juice Bar 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 03/03/2015

Florida document number L15000038864

and assigned

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:

3389 Sheridan St, Unit 107

(Principal office address MUST BE A STREET ADDRESS)

Hollywood, FL 33021

Enter new mailing address, if applicable:

3389 Sheridan St, Unit 107

(Mailing address MAY BE A POST OFFICE BOX)

Hollywood, FL 33021

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:

Daniel Caamano

New Registered Office Address:

3389 Sheridan St, Unit 107

*Enter Florida street address*

Hollywood

Florida 33021

*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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Daniel Caamano	3389 Sheridan St, Unit 107, Hollywood, FL 33021	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
AMBR	Emilia Shinas	1740 71st Street Miami Beach, FL 33141	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
AMBR	Alexandra Castillo	1740 71 Street Miami Beach, FL 33141	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

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☐ Change  
☐ Add  
☒ Remove  
☐ Change

**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)(h)

**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**

212415

Signature of a member or authorized representative of a member

Daniel Czaruno

Typed or printed name of signee

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**Filing Fee: \$25.00**

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