

L15000149811

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

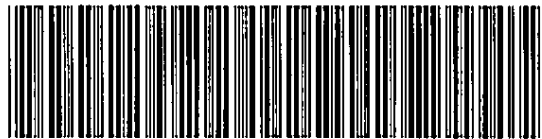
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000313390050

05/22/18--01007--001 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 MAY 22 AM 9:05

N COOPER
MAY 24 2018



897 Main Street
P.O. Box N
Sanford, Maine 04073

Eugene H. Gaudette, Esq.
General Counsel

ehg@ehglaw.com email
207-324-1551 office
207-636-8480 fax

May 18, 2018

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

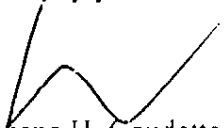
RE: Articles of Amendment

To Whom It May Concern:

Enclosed for consideration and filing the Articles of Amendment for the following
Limited Liability Company:
John Donuts, LLC

Also enclosed is a check in the amount of \$25.00 representing the fee for this transaction.
If you have any questions please do not hesitate to contact me.

Sincerely yours,



Eugene H. Gaudette

EHG/tc
Enclosure

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

John Donuts, 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 September 1, 2015 and assigned
Florida document number L15000149811.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 MAY 22 AM 9:05

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:

New Registered Office Address:

Enter Florida street address

City

Florida

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Fernando Cafua	12236 Tillinghast Circle	<input type="checkbox"/> Add
		Palm Beach Gardens, FL 33418	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Mark Cafua	280 Merrimack Street	<input checked="" type="checkbox"/> Add
		Methuen, MA 01844	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Gregory Cafua	280 Merrimack Street	<input checked="" type="checkbox"/> Add
		Methuen, MA 01844	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	David Cafua	280 Merrimack Street	<input checked="" type="checkbox"/> Add
		Methuen, MA 01844	<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

