

L1500 0157562

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

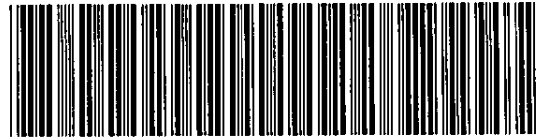
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
16 MAY 13 AM 11:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 16 2016

J SHIVERS

6"



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 25, 2016

ALEJANDRA PEREZ
9350 US HWY 192 #101
CLERMONT, FL 34714

SUBJECT: SABROSO BAKERY & CAFE, LLC
Ref. Number: L15000153562

We have received your document for SABROSO BAKERY & CAFE, LLC and your check(s) totaling \$35.00. 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 the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist III
Registration/Qualification Section

Letter Number: 616A00008442

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SABROSO BAKERY & CAFE, 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:

ALEJANDRA C MONT

Name of Person

SABROSO BAKERY & CAFE, LLC

Firm/Company

9350 US HWY 192 #101

Address

CLERMONT, FLORIDA 34714

City/State and Zip Code

STONERUSTIC@HOTMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALEJANDRA C MONTES PEREZ

305 586-0778
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 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**

SABROSO BAKERY & CAFE, 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 09/08/2015 and assigned
Florida document number L15000153562.

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)

6673 TIME SQUARE AVE

SUITE 103

ORLANDO FL 32835

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

ALEJANDRA C MONTES PEREZ

New Registered Office Address:

6673 TIME SQUARE AVE # 103

Enter Florida street address

ORLANDO

City

Florida

32835

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	JULIO LOPEZ	430 BLAKE AVE	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
		DAVENPORT, FL 34711	<input type="checkbox"/> Change
MGR	JONATHAN ACEVEDO	5980 WESTGATE DRIVE	<input type="checkbox"/> Add
		APT 302	<input checked="" type="checkbox"/> Remove
		ORLANDO, FL 32835	<input type="checkbox"/> Change
MGR	MIGUEL JOSE ROJAS	205 JOCELYN DRIVE	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
		DAVENPORT, FL 33897	<input type="checkbox"/> Change
MGR	ALEJANDRA C MONTES PEREZ	6673 TIME SQUARE AVE	<input checked="" type="checkbox"/> Add
		SUITE 103	<input type="checkbox"/> Remove
		ORLANDO, FL 32835	<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

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

16 MAY 13 AM 1:26
S: DEERVIEW CD 094010Z
O: DEERVIEW CD 094010Z

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 ABRIL 19th 2016

Signature of a member or authorized representative of a member

JULIO LOPEZ, JONATHAN ACEVEDO, MIGUEL JOSE ROJAS

Typed or printed name of signee

