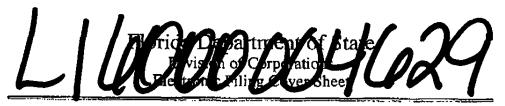
Division of Corporations

https://efile.sunbiz.org/scripts/efilcovr.exe



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document,

(((H16000098038 3)))



H160000980383ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

Frome

Account Name

: CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053

Fax Number

: (561)694-8107 : (561)694-1639

**Enter the email address for this business entity to be used for future

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGNS D'LITES ICE CREAM FORT LAUDERDALE, LLC

annual report mailings. Enter only one email address please.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

'APR 21 2016

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

D'LITES ICE CREAM FORT LAUDERDAI			
(Name of the Limited Liability (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)		
The Articles of Organization for this Limited Liability C Florida document number L16000004629	Company were filed on 01/11/2016	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limi	ited liability company here:		
The new name must be distinguishable and contain the words "Lim	nited 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 ADDR	RESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office add Name of New Registered Agent:		The name of the or	<u>evy</u>
New Registered Office Address:		全部 碧	
*** CHARLES OTHER AUMESS	Enter Florida street address . Florida	20 SSEE	<u>-</u> П
***************************************	City	Zip Code	フ
New Registered Agent's Signature, if changing Registere	d_Agent:		
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and c accept the obligations of my position as registered at being filed to merely reflect a change in the registere company has been notified in writing of this change.	complete performance of my duties, and I an agent as provided for in Chapter 605, F.S. O ed office address, I hereby confirm that the t	n familiar with and r, if this document is	10

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>	Name	Address	Type of Action
MBR	BRAZIL & USA IMPORT AND EXPORT, CORP	253 NW 166 AVENUE	□ Add
		PEMBROKE PINES, FL 33028	Remove
			Change
			Add
		-	□ Remove
			☐ Change
			□ Add
			Remove
			Change
			Add
			Remove To Remove
		·	□ Change
			Add
			Ramove
			Change

•	,		
•			
	Te co	2015	
		in the state of th	1
,		₹ ->	
,	015.4 Cr	0 ,	ī
			7
		11: 42	
Effect	ive date, if other than the date of filing:	•	
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list	.0207 (3)(b) ed as the	
docum	nent's effective date on the Department of State's records.		
the re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie	er of:	
) The	90th day after the record is filed.		
Dated	April 20 , 2016 .		
	6 /		

Page 3 of 3

Filing Fee: \$25.00