

L16000141271

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (350) 617-6363

From:
Account Name : BARBOSA LEGAL
Account Number : 120110000049
Phone : (305) 501-4660
Fax Number : (305) 359-9543

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

Email Address: TOM@CAFE6OCEAN.COM

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FASA SUPERMARKET LLC**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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| Page Count | 05 |
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2017 OCT 23 PM 9:02

17 OCT 23 AM 8:30

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FASA SUPERMARKET 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.

Wellington M. Cunha

Name of Person

Firm/Company

6693 Collins Avenue, Suite 236

Address

Miami Beach, FL 33141

City/State and Zip Code

tom@cafe6ocean.com

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

For further information concerning this matter, please call.

Wellington M. Cunha

305

379-4734

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

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

FASA SUPERMARKET 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 07/29/2016 and assigned
Florida document number 116000141271.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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)

1967-69-71 71st Street

Miami Beach, FL 33141

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1967-69-71 71st Street

Miami Beach, FL 33141

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:

Wellington M. Cunha

New Registered Office Address:

6693 Collins Avenue, Suite 236

Enter Florida street address

Miami Beach

Florida 33141

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.

/s/ Wellington Cunha

If Changing Registered Agent, Signature of New Registered Agent

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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 | Andres Alberto Anez Bustillos | 1967-69-71 71st Street | <input type="checkbox"/> Add |
| | | Miami Beach, FL 33141 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | Wellington M. Cunha | 6693 Collins Avenue, Suite 236 | <input checked="" type="checkbox"/> Add |
| | | Miami Beach, FL 33141 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input checked="" type="checkbox"/> Remove |
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

N/A

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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 66S 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 October 23rd, 2017/s/ Wellington Cunha
Signature of a member or authorized representative of a memberWELLINGTON M CUNHA

Typed or printed name of signee