

L14000204986

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

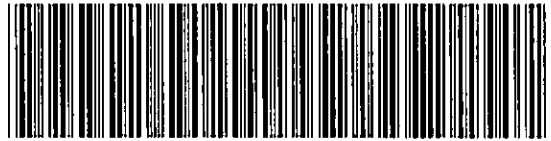
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8/16/17

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CHURROS ON FLEEK LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

HERNAN ALMIRON
Name of Person
EXPARTA OF MIAMI CORP.
Firm/Company
2721 OCEAN CLUB BLVD #303
Address
HOLLYWOOD 33019
City/State and Zip Code
INFO@EXPARTAMIAMI.COM
E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

HERNAN ALMIRON 305 924-3299
Name of Person at (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**

CHURROS ON FLEEK 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 11/08/2016 and assigned
Florida document number L16000204986.

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)

7330 NE 2ND AVE UNIT 104

MIAMI FL 33138

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7330 NE 2ND AVE UNIT 104

MIAMI FL 33138

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TALLAHASSEE, FLORIDA

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:

EXPARTA OF MIAMI CORP.

New Registered Office Address:

2721 OCEAN CLUB BLVD #303

Enter Florida street address

HOLLYWOOD

Florida 33019

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.

H 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	HS GLOBAL BUSINESS LLC	7207 BAY DR UNIT 19	<input type="checkbox"/> Add
		MIAMI BEACH FL 33141	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
PD	EXPARTA OF MIAMI CORP.	2721 OCEAN CLUB BLVD #303	<input checked="" type="checkbox"/> Add
		HOLLYWOOD FL 33019	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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