

L16000 220 570

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

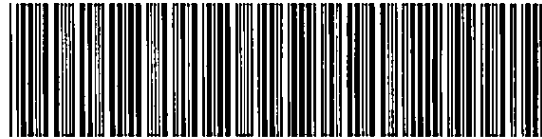
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05/21/19--01023--006 \*\*25.00

2019 JUN 21 PM 5:48

FILED

C. GOLDEN

JUN 24 2019

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** CHOULALA FINE PASTRIES, 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:

Marc J. Miles

\_\_\_\_\_  
Name of Person

Law Offices of Marc J. Miles P.A.

\_\_\_\_\_  
Firm/Company

333 Tamiami Trail S Ste. 219

\_\_\_\_\_  
Address

Venice, FL 34285

\_\_\_\_\_  
City/State and Zip Code

mmiles@marcmileslaw.com

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

For further information concerning this matter, please call:

Marc Miles

941 484-8280  
at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 8, 2019

MARC J. MILES  
333 TAMiami TRAIL S  
SUITE 219  
VENICE, FL 34285

SUBJECT: CHOULALA FINE PASTRIES, LLC  
Ref. Number: L16000220570

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

An individual must sign on behalf of the business entity you have designated as the registered agent.

Please return 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) 245-6050.

Claretha Golden  
Regulatory Specialist II

Letter Number: 119A00011486

RECEIVED

2019 JUN 21 PM 12:25

CLARETHA GOLDEN

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

**FILED**

2019 JUN 21 PM 5:48

CHOULALA FINE PASTRIES, 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 12/6/2016 and assigned  
Florida document number L16000220570.

This amendment is submitted to amend the following:

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

Choulala, LLC

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)**

**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:

Law Offices of Marc J. Miles P.A.

New Registered Office Address:

333 Tamiami Trail S. Ste. 219

*Enter Florida street address*

Venice

*City*

Florida 34285

*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 attending 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>                      |
|--------------|----------------------------------|-------------------------------|--|
| DIR          | JERRY BONHOMME                   | 1786 STATE ROAD 436           | <input type="checkbox"/> Add               |
|              |                                  | WINTER PARK, FL 32792         | <input checked="" type="checkbox"/> Remove |
|              |                                  |                               | <input type="checkbox"/> Change            |
| Owner        | MJLM USA LLC                     | 1786 STATE ROAD 436           | <input type="checkbox"/> Add               |
|              |                                  | WINTER PARK, FL 32792         | <input checked="" type="checkbox"/> Remove |
|              |                                  |                               | <input type="checkbox"/> Change            |
| MGR          | MACLEOD MANAGEMENT SERVICES, LLC | 333 Tamiami Trail S. Ste. 219 | <input checked="" type="checkbox"/> Add    |
|              |                                  | Venice, FL 34285              | <input type="checkbox"/> Remove            |
|              |                                  |                               | <input type="checkbox"/> Change            |
| AR           | Marc Miles                       | 333 Tamiami Trail S. Ste. 219 | <input checked="" type="checkbox"/> Add    |
|              |                                  | Venice, FL 34285              | <input type="checkbox"/> Remove            |
|              |                                  |                               | <input type="checkbox"/> Change            |
|              |                                  |                               | <input type="checkbox"/> Add               |
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
[illegible]

(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)

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.

y 16

A handwritten signature in black ink, appearing to be 'L', is written on a set of three horizontal lines. The signature starts with a small loop on the left and extends upwards and to the right, crossing the top line.

Marc Miles, Authorized Representative

Page 3 of 3

**Filing Fee: \$25.00**