## 11700006595

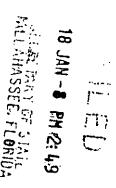
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## **COVER LETTER**

TO:	Registration Sec Division of Corp							
CUD		N COFFEE HAUS						
SUBJECT: Name of Limited Liability Company								
The e	nclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.					
Please	e return all correspon	ndence concerning this matter	to the following:					
		REGINALD JACKSON						
			Name of Person					
		BRAZILIAN COFFEE HA	AUS					
Firm/Company								
1046 SANCTUARY COVE DRIVE								
			Address					
		NORTH PALM BEACH.	FL 33410					
			City/State and Zip Code					
		BRAZILCOFFEEHAUS@						
		E-mail address: (	to be used for future annual report notific	cation)				
For fi	irther information ed	oncerning this matter, please ca	all:					
REGINALD JACKSON  Name of Person			561 951-3111 at ()					
			Area Code Daytime	Telephone Number				
Enclo	sed is a check for th	e following amount:						
<b>■</b> \$.	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

BRAZILIAN COFFEE HAUS LI							
(Name of the Lim	ited Liability Comps (A Florida Limited	any as it now appears or Liability Company)	n our records.)		<del></del>		
The Articles of Organization for this Limited I Florida document number L17000006595	Liability Company	were filed on 01/09/	2017	ar	ıd assiş	gned	
This amendment is submitted to amend the fol	llowing:						
A. If amending name, enter the new name	of the limited liab	oility company here:					
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desig	nation "LLC" or the	abbreviati	on "L.L	.C."	
Enter new principal offices address, if appli	icable:	4080 PGA BLVD					
Principal office address MUST BE A STREET ADDRESS		PALM BEACH GARDENS, FL 33410					
Inter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)		4080 PGA BLVD PALM BEACH GA	ARDENS, FL 3341	0 3:			
B. If amending the registered agent and registered agent and/or the new registered of			ur records, ente	r the m	<b>C</b> 3	f the nev	
Name of New Registered Agent:				FLORID,	記念	<u>i i i</u>	
New Registered Office Address:	4080 PGA BLV			30. A	6		
	PALM BEACE	Enter Florida I GARDENS	street address , Florida =	3410			
		City	, , , , , , , , , , , , , , , , ,		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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	DAVID F. LONG	128 Lake Carol Dr; West Palm Bea	■ Add
			□ Remove
		·	Change
			Add
			Remove
			Address Markette
			MB Addre
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Typed or printed name of signee

Filing Fee: \$25.00