# 117000035578

(Re	equestor's Name)	
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MR 23 2017 J. HARRIS

## **COVER LETTER**

Division of Corpo	orations		
SUBJECT: LL FRU	Name of Lim	CE LLC ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	Mildred )	Name of Person	<del>1</del> 511
		Firm/Company	
	2946	Sw 25 stoet Address	
	Miani, f	City/State and Zip Code	
	E-mail address: (t	to be used for future annual report notific	cation)
For further information con	cerning this matter, please ca	all:	
Milded Me Name of P	vectence	at ( <u><b>313</b></u> ) <u><b>30</b>) – 6</u> Area Code Daytime	Z 46 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:

TO:

**Registration Section** 

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

LL FROIT AND PRODUC (Name of the Limited Liability Comp (A Florida Limited	eany as it now appears on our r TLiability Company)	ecords.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L1700033578</u> .	y were filed on <u>2/14/2</u>	ol 7— and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	oility 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)		<u> </u>
		A R
		2 32 :
Enter new mailing address, if applicable:		<u>₹</u>
(Mailing address MAY BE A POST OFFICE BOX)		<b>5</b> 8 4
_		<u>ස</u> සිදු
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.		cords, <u>enter the name of the new</u>
Name of New Registered Agent:	<u></u>	
New Registered Office Address:	E . Cl. 11	
	Enter Florida street a	address
	City	_, Florida Zip Code
Naw Degistered Agent's Signature if shanging Degistered Agent	•	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 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 = A	authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	milded Jaz Muchens Mantil	1 2946 SW 25 street	
		Miani Fl, 13/33	□ Remove
			Change
MGR	Humberto B Pineda Peng	2946 sw 25 street	
		Miami, FL 33133	□ Remove
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fective date, if other than the date of filing:	(optional)	
fective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to date of filing or more than some of the date inserted in this block does not meet the applicable statutory filing require cument's effective date on the Department of State's records.	ements, this date will not be lis	05.0207 ( sted as t
record specifies a delayed effective date, but not an effective time, at The 90th day after the record is filed.	: 12:01 a.m. on the ear	lier of:
$\frac{1}{1}$ ated $\frac{03}{17}$ $\frac{17}{17}$ .	•	<del></del>
	• •	7 4
med , ,	n	
Signature of a member or authorized representative of a mem	nber N	, (1)
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Filing Fee: \$25.00