Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : PEREZ ARCHE AN ACCOUNTING & TAX SERVICES INC

Account Number : I20070000033 Phone : (305)649-7040 Fax Number : (305)643-3237

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

Email Address: Oraica isabel@ amail com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN C & B GOURMET ANDALUCIA, LLC

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Corporate Filing Menu

Help

S. WARREN 0CT 2 5 2017

COVER LETTER

TO: Registration S Division of Co				
SUBJECT:	C & B GOURMET ANDA	LUCIA LLC	•	
SUBJECT.	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspond	ondence concerning this matter	to the following:		
	AN	SA ISABEL ARAICA		
	Name of Person			
PEREZ ARCHE AN ACCOUNTING TAX SERVICES INC				
Firm/Company				
	4011 W	. FLAGLER ST STE 501		
		Address		
	CORAL	GABLES, FL 33134		
		City/State and Zip Code		
	ARAICAISABEL@GMAIL.COM E-mail address: (to be used for future annual report notification)			
For further information	concerning this matter, please ca		cation)	
ANA ISABEL A	•	305 649-7040 at ()		
Name o	of Person	Area Code Daytime	Telephone Number	
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 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 ARTICLES OF ORGANIZATION **OF**

C & B GOURMET	ANDALUCIA LLC	
(Name of the Limited Liab (A Fiori	lity Company as it now appears of da Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability Florida document number <u>L17000060041</u>	Company were filed on	/2017 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here	:
BOCAITO GOURMET ANDALUCIA LLC		
The new name must be distinguishable and contain the words "Li	mited Liability Company," the design	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORESS)	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad-		
New Registered Office Address:		
	Enter Florida	street address
		, Florida
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Register	ed Agent:	
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the register company has been notified in writing of this change	complete performance of my agent as provided for in Cha red office address, I hereby o	o duties, and I am familiar with and apter 605, F.S. Or, if this document is confirm that the limited liability
	it Changing Kegisteres Agent	Signature of New Registered Agent
	Page 1 of 3	

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR =	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			Remove
			Change
			Add
			□ Remove
			CI Change
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ffective date, if other than the o	late of filing:		(optional)	
an effective date is listed, the date must	be specific and cannot be p	prior to date of filing or more th	an 90 days after filing uirements, this date) Pursuant to 605.0 will not be listed
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