## 11700094805

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## COVER LETTER

TO:	Registration Se Division of Cor					
crim ii		NVENIENT DELI LLC				
SOBJI	ECT:		ited Liability Company			
		Amendment and fee(s) are sub				
		JOSE R RODRIGUEZ				
			Name of Person			
		5 TO 9 CONVENIENT DI	ELI LLC			
			Firm/Company	-		
		3712 N 15TH STREET				
	Address					
		TAMPA FL 33610				
	City/State and Zip Code					
		CHIVITO761@HOTMAIL E-mail address: (	.COM to be used for future annual report notifi	ication)		
For fu	ther information c	oncerning this matter, please ca	all:			
CARL	OS BARAJAS		516 277-6143			
-	Name o	f Person	at () Area Code Daytime	Telephone Number		
Enclos	ed is a check for th	ne following amount:				
<b>■</b> \$2	5.00 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

5 TO 9 CONVENIENT DELI 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  $\frac{04/28/2017}{2}$ and assigned Florida document number L17000094805 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) 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: CARLOS BARAJAS Name of New Registered Agent: 3712 N 15TH ST New Registered Office Address: Enter Florida street address

## 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.

City

TAMPA

f 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>	Address	Type of Action
MGR	JOSE R RODRIGUEZ	3712 N 15TH STREET	
		TAMPA FL 33610	Remove
			□ Change
MGR —	CARLOS BARAJAS	3712 N 15 TH STREET	Add
		TAMPA FL 33610	☐ Remove
			☐ Change
			🗖 Remove
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Effective date, if other than the d If an effective date is listed, the date must b Note: If the date inserted in this bloc	se specific and cannot be p k does not meet the ap	prior to date of filing or plicable statutory fili	more than 90 days at	otional) fter filing.) Pursua this date will not	nt to 605.020 i be listed a
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document's effective date on the Dep he record specifies a delayed of The 90th day after the record Dated DECEMBER 4	ed is filed.  2017  2017  ignature of a member or a			Ş.,.	2s   7 ()

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