Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

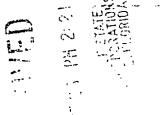
Account Name : ACCOUNTING MAX SERVICES INC

Account Number : I20220000162

Phone : (954)724-1114 Fax Number : (954)252-4124

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

Email	Address:		
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ERICK SALAZAR & DAYNELLYS CASTILLO LLC

Certificate of Status	1
Certified Copy	0
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TO:

## H 23 000 373 4873

## **COVER LETTER**

TO: Registration So Division of Cor					
ERICK SA	ERICK SALAZAR & DAYNELLYS CASTILLO LLC				
SUBJECT.	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	CASTILLO, DAYNELLY	rs			
		Name of Person			
	ERICK SALAZAR & DA	YNELLYS CASTILLO LLC			
	Firm/Company				
	31 SE 5th Street Apt 1811				
	Address				
	Miami, Fl. 33131				
		City/State and Zip Code	<del></del>		
	yummyyum:ny@gmail.con		**************************************		
For further information of	r-mail andress: ( concerning this matter, please c	to be used for future annual report and	ilication)		
CASTILLO, DAYNELI		954 5532538			
	of Person	at ()	Tallahan Nasahan		
NBINE (	w reison	Alea Code Daytin	ne Telephone Number		
Enclosed is a check for t	he following amount:				
S25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (accittonal copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addre Registration	Section	Street Address: Registration Se			
Division of C P.O. Box 633		Division of Co The Centre of			
Tallahassee,			oe Street, Suite 810		

Tallahassee, FL 32303

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ERICK SALAZAR & DAYNELLY			
(Name of the Limit	ed Liability Compa (A Florida Limited	ny as it now appears on our Liability Company)	records.)
The Articles of Organization for this Limited Li Florida document number <u>L18000132035</u>	ability Company		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
Y & Y DELI, LLC			_
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	N/A	
(Principal office address MUST BE A STREE	T ADDRESS _I	N/A	
		N/A	
			; _
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		N/A	······································
		N/A	( A)
		N/A	····
B. If amending the registered agent and/or ragent and/or the new registered office address  Name of New Registered Agent:		address on our records,	enter the name of the new registered
New Registered Office Address:	N/A		
New Registered Office Address.	<del></del> .	Enter Fiorida stree	t address
	N/A		, Florida N/A
		City	Zip Code
New Registered Agent's Signature, if changing I	Registered Agent:		
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as regibeing filed to merely reflect a change in the company has been notified in writing of this	er and complete stered agent as registered office	performance of my du provided for in Chapter	ties, and I am familiar with and 605, F.S. Or, if this document is

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If Changing Registered Agent, Signature of New Registered Agent

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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

Page: 4 of 5

<u>Title</u>	<u>Name</u>	Address	Type of Action
N/A	N/A	N/A	□Add
			□Remove
		- <u></u> -	
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		4.1.74	□Remove
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