L18000267844

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: Lectured Fax an 3/6/19 with Lectured Fax an 3/6/19 with Letter refersing the Entry name for Letter refersion the Entry name for Letter refersion the Entry name for Letter refersion the Entry name for

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February 11, 2019

MARIA PAZ STUDIO CAFE & MARKET LLC 515 LAKE AVENUE LAKE WORTH, FL 33460

SUBJECT: STUDIO CAFE & MARKET LLC

Ref. Number: L18000267844

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is L17000014117.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 519A00002922

Susan Tallent Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Secti Division of Corpo	rations	*	3
SUBJECT:	Studio Cat Name of Limit	e + Market ted Liability Company	LLC
The enclosed Articles of An	nendment and fee(s) are subn	nitted for filing.	
Please return all correspond	ence concerning this matter to	o the following:	
	MARI	Name of Person	
	Studi	Name of Person O Cale + Ma Firm/Company	rket LhC
		hake Avenue	
	Lake	City/State and Zip Code 2 p a Z Defused for future annual report notificat	33460
	Mario E-mail address: (to	2 D Q Z Defused for future annual report notificat	ion)
For further information cond	erning this matter, please cal		
Mana of Po	Paz	at (<u>56)</u> <u>667</u> Area Code Daytime Te	- 3923 Jephone Number
Enclosed is a check for the f	ollowing 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:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 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

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] [Principal office address MUST BE A STREET ADDRESS]	
A. If amending name, enter the new name of the limited liability company here: ART Studio Cafe Limited Liability Company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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: Name of New Registered Agent: MARIA PAZ	(Normal of the Limited Limitity Company as it now appears on our records.)
A. If amending name, enter the new name of the limited liability company here: ART Studio Cafe Limited Liability Company. The designation "LLC" or the abbreviation "LLC." The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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: Name of New Registered Agent: MARIA PAZ	The Articles of Organization for this Limited Liability Company were filed on Novi 16 2018 and assigned Florida document number L 18000267844
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: Name of New Registered Agent: MARIA PAZ	This amendment is submitted to amend the following:
(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: Name of New Registered Agent: MARIA PAZ	The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
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: Name of New Registered Agent: MARIA—PAZ	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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: Name of New Registered Agent: MARIA PAT	(Principal office address MUST BE A STREET ADDRESS)
Name of New Registered Agent: MARIA PAZ	Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Lake Worsh, FL 3'3460
Enter Florida street address	
1 - 10 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1	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

If Changing Registered Agent, Signature of New Registered Agent

MARIA PAZ

Zip Code

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

Title	Name	Address	Type of Action
MGR	GREG SENECKI	515 Lake Avenue	
	·	Lake Wordh, FL 334	60 Kemove
			☐ Change
			□ Remove
			☐ Change
			□ Add
			☐ Remove
			Change
			□ Remove
	·		☐ Change
			□ Remove
			Change
			🗆 Add
			☐ Remove
			Change

Note	tive date, if other than the date of filing: <u>January 39 3-019</u> (optional) flective date is listed, the date must be specific and cannot be prior to date of filing of more than 90 days after filing.) Pursuant to 605.026 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ment's effective date on the Department of State's records.
Th	ecord specifies a delayed effective date, but not an effective time, at $12:01\ a.m.$ on the earlier a
	January 29 2019. 2019.

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00

(850) 245-6992 Fax = (850) 245-6897 ear Sin/Madam a Sunbiz have No intension Please remove grep Simlaki's January 2019. 561-667-3923