

30/8/22, 7:45

Division of Corporations

Florida Department of State

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : DAVID NOHRA ZAKIA
Account Number : I20220000125
Phone : (239)494-0057
Fax Number : (239)913-6599

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

Email Address: tuofic@nusa@gmail.com

2022 AUG 30 10:50
2022 AUG 30 12:02

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SANTA FE DELI BAKERY LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2022 AUG 30 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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08 30 2022
C. Brumby

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SANTA FE DELI BAKERY LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DAVID NOHRA ZAKIA

Name of Person

Firm/Company

28719 ALESSANDRIA CIRCLE

Address

BONITA SPRINGS, FLORIDA, ZIP CODE 34135

City/State and Zip Code

tuoficinaenusa@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAVID NOHRA ZAKIA

Name of Person

239
at ()

Area Code

4940057

Daytime 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 &
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(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SANTA FE DELI BAKERY 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 06/28/2022 and assigned Florida document number 1.22000291517

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: 3181 NORTH VILLAGE CT, SUITE 200 BONITA SPRINGS, FL, ZIP CODE 34135

Enter new mailing address, if applicable: 3181 NORTH VILLAGE CT, SUITE 200 BONITA SPRINGS, FL, ZIP CODE 34135

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: New Registered Office Address: Enter Florida street address, Florida, City, Zip Code

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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 = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	David Nohra Zakia	28719 Alessandria Circle	<input type="checkbox"/> Add
		Bonita Springs, Fl, Zip Code 34135	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Gustavo Adolfo Vieira Goncalves	3181 NORTH VILLAGE CT, SUITE 200	<input checked="" type="checkbox"/> Add
		Bonita Springs, Fl, Zip Code 34135	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Maria Lurdes Goncalves	3181 NORTH VILLAGE CT, SUITE 200	<input checked="" type="checkbox"/> Add
		Bonita Springs, Fl, Zip Code 34135	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Jose Antonio Vieira	3181 NORTH VILLAGE CT, SUITE 200	<input checked="" type="checkbox"/> Add
		Bonita Springs, Fl, Zip Code 34135	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

