## L22000161000

| (Requestor's Name)                      |
|---|
|   |
| (Address)                               |
|   |
| (Address)                               |
| (Addless)                               |
|   |
| (City/State/Zip/Phone #)                |
|   |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
| (Dusiness Entry Name)                   |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
|   |
|   |
| Special Instructions to Filing Officer: |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |

Office Use Only



200387137212

95/20/22--01022--018 \*\*60.00

2022 MAY 20 PM 3: 03

TILE OCYMPONIC

## **COVER LETTER**

| Division of Cor             |  |   |   |  |
|-----------------------------|--|---|---|--|
| Add New P                   | erson to Coporation                          | •   |   |  |
| Sobject.                    | Name of Lim                                  | ited Liability Company  |   |  |
| The enclosed Articles of    | Amendment and fee(s) are sub-                | mitted for filing.  |   |  |
| Please return all correspo  | ndence concerning this matter                | to the following:   |   |  |
|                             | Joseph Muniz                                 |   |   |  |
|                             |  | Name of Person  |   |  |
|                             | Utensil Hospitality LLC                      |   |   |  |
|                             |  | Firm/Company  |   |  |
|                             | 14434 Paddock Drive                          |   |   |  |
|                             |  | Address   |   |  |
|                             | Wellington, FL 33414                         |   |   |  |
|                             |  | City/State and Zip Code   |   |  |
|                             | jmgofsu@yahoo.com                            |   |   |  |
|                             | E-mail address: (                            | to be used for future annual report notif                           | ication)  |  |
| For further information of  | oncerning this matter, please co             | all:  |   |  |
| Joseph Muniz                |  | 561 762-7024  |   |  |
| Name of Person              |  | Area Code Daytime   | : Telephone Number  |  |
| Enclosed is a check for the | ne following amount:                         |   |   |  |
| ☐ \$25.00 Filing Fee        | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) |  |
|                             |  | Street Address:   | Nion  |  |
|                             |  | •   |   |  |
|                             | City/State and Zip Code                      |   |   |  |

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 MAY 20 PM 3: 03

Utensil Hospitality LLC SECRETARY OF STATE TALLAHASSEE, FL (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 April 04, 2022 and assigned Florida document number \_\_\_\_L22000161000 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address \_. Florida \_\_\_ City 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> | Name          | Address                                   | Type of Action |
|--------------|---------------|---|----------------|
| MGR          | Rachel Muniz  | 14434 Paddock Drive, Wellington, FL 33414 | <b>=</b> Add   |
|              |               |   | □Remove        |
|              |               |   | □Change        |
|              |               |   | □Add           |
|              |               |   |                |
|              |               |   | □Change        |
|              |               |   | □Add           |
|              |               |   | Remove         |
|              |               |   | □ Change       |
|              | <del></del> - | <u> </u>                                  | _□Add          |
|              |               |   | ⊡Remove        |
|              |               |   | □Change        |
|              |               |   | □Add           |
|              |               |   | □Remove        |
|              |               |   | □Change        |
|              |               |   | 🗆 Add          |
|              |               |   | □Remove        |
|              |               |   | ∐Change        |

|  |                       |                |                  |                 |                                 |                                | <del></del>                   | <del> </del>             |   |
|--|-----------------------|----------------|------------------|-----------------|---------------------------------|--------------------------------|-------------------------------|--------------------------|---|
|  |                       |                |                  |                 |                                 |                                |                               |                          |   |
|  | •                     | <del></del>    |                  |                 |                                 |                                |                               |                          |   |
|  |                       |                |                  |                 |                                 |                                |                               |                          |   |
|  |                       |                |                  |                 |                                 |                                |                               |                          |   |
| •  | -                     |                |                  |                 |                                 |                                |                               |                          |   |
|  |                       |                |                  | •               |                                 |                                |                               |                          |   |
|  |                       |                |                  |                 | · · · · · ·                     |                                | S                             | 202                      |   |
|  |                       | -              |                  |                 |                                 |                                | - <del>10</del> 22            | 2022 HAY                 | 77  |
|  |                       |                |                  |                 | <del></del>                     |                                | 11.7<br>11.7<br>12.7          | γ  <br>20                | E CONTRACTOR OF THE PERSON OF |
|  |                       |                |                  |                 |                                 |                                | 788E                          | PH                       | 557   |
|  |                       |                |                  |                 |                                 |                                | <u>("'\</u>                   | _پي_                     |   |
|  |                       |                |                  |                 |                                 |                                | 프                             | 03                       |   |
|  |                       |                |                  |                 |                                 |                                |                               |                          |   |
|  |                       |                |                  |                 |                                 |                                |                               |                          |   |
| ·  |                       |                |                  |                 |                                 |                                |                               |                          |   |
|  |                       |                |                  | <del></del> .   |                                 |                                |                               |                          |   |
| ffective date, if ot                           | her than the dai      | te of filing:  |                  |                 |                                 | (optic                         | onal)                         |                          |   |
| an effective date is lis tote: If the date ins | ted, the date must be | specific and c | annot be prior t | o date of filin | g or more that<br>y filing requ | n 90 days after irements, this | filing.) Pursu<br>date will n | ant to 605<br>of be list | 0.0207<br>ed as :   |
| ocument's effective                            | date on the Depar     | tment of Sta   | ate's records.   | •               |                                 |                                |                               |                          |   |
|  | 1 1 02 1              |                | mr               | 12.01           | an an tha                       | angling at the                 | \ Thu 00th                    | day afta                 | rthe  |
| record specifies a d<br>d is filed.            | rayed effective da    | ac, but not a  | n enective til   | HC, at 12.01    | a.m. on use                     | carner or, to                  | j the our                     | day and                  | · the   |
| 05/03  |                       |                | 2022             |                 |                                 |                                |                               |                          |   |
| Dated  |                       | <del>\</del>   |                  | <del>_</del> ·  | <i>'</i>                        |                                |                               |                          |   |
|  | 1                     | 1 12           |                  | フ               |                                 |                                |                               |                          |   |
|  |                       |                | ember or autho   | 5               |                                 |                                |                               |                          |   |

Filing Fee: \$25.00