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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

porations		
A FOODS LLC		
Name of Lim	ited Liability Company	
Amendment and fee(s) are sub	mitted for filing.	
ndence concerning this matter	to the following:	
	KARINA MENA	
	Name of Person	
CC	PRDOBA FOODS LLC	
	Firm/Company	
	4477 E 11 AV	
	Address	
	HIALEAH FL 33013	
KARINA@0	City/State and Zip Code GAUCHORANCHFOODS.COM	
E-mail address: (to be used for future annual report notifi	ication)
oncerning this matter, please ca	all:	
	305 733-4768	
f Person		Telephone Number
ne following amount:		
■ \$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)
	KARINA@GE-mail address: (oncerning this matter, please concerning this matter) F Person	A FOODS LLC Name of Limited Liability Company Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: KARINA MENA Name of Person CORDOBA FOODS LLC Firm/Company 4477 E 11 AV Address HIALEAH FL 33013 City/State and Zip Code KARINA@GAUCHORANCHFOODS.COM E-mail address: (to be used for future annual report notification oncerning this matter, please call: at (

MAILING ADDRESS:

TO:

Registration Section

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



CORDOBA FOODS 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 Compan	y were filed on July 13th	2004 and assigned
Florida document number L04000051624	·		
This amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name	of the limited lia	bility company here:	
The new name must be distinguishable and contain the	words "Limited Liab	bility Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	N/A	
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:		N/A	<u>. </u>
(Mailing address MAY BE A POST OFFICE	E BOX)		
B. If amending the registered agent and registered agent and/or the new registered of	• • • • • • • • • • • • • • • • • • • •		records, enter the name of the new
Name of New Registered Agent:	KARINA FEE	RNANDA MENA	
New Registered Office Address:	4477 E 11 AV	Enter Florida stre	at address
	HIALEAH		Florida 33013
		City	Zip Code

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>	Address	Type of Action
Megr	David Mena	2665 NE 164 ST MIAMI FL 33160	Add
			Remove
			Change
			Remove
			□ Change
		· · · · · · · · · · · · · · · · · · ·	Remove
		□ Change	
			Add
			Remove
			Change
		Remove	
		Change	
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			Remove
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IIVi	NA CONTRACTOR OF THE CONTRACTO
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	12/17/18
	e date, if other than the date of filing: (optional) ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02
<u>te:</u> [[the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
umen	t's effective date on the Department of State's records.
recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier
	Oth day after the record is filed.
ed	Beceuber 15th 2018
	Signature of a member or authorized representative of a member
	Signature of a member of authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00