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M. THOMAS

JUN - 3 2009

EXAMINER

## **COVER LETTER**

Division of Co		v	
CVIDATECOE	FOOD	GANG, LLC.	
SUBJECT:		ted Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	condence concerning this matter	to the following:	
		Frederic Barthe, Esq.	·
		Name of Person	
		Firm/Company	TALLAHASSEE, FILORIS
	2455 I	E. Sunrise Blvd., Suite 602	
		Address	SEE
	For	t Lauderdale, FL 33304  City/State and Zip Code	
	fn	nb@barthe-leigh.com	in the second se
	E-mail address: (	to be used for future annual report notificat	tion)
For further information	concerning this matter, please of	call:	
	F. Barthe	at ( <u> </u>	23-5555
Name	of Person	Area Code & Daytime T	eiepnone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regis Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, FL 32314	STREET/COURIER Registration Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ions er Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FOOD GA	NG, LLC.			
(Name of the Limited Liability Compa (A Florida Limited 1	ny as it now appears or Liability Company)	our records.)		
The Articles of Organization for this Limited Liability Company Florida document numberL06000056267		NIT 4 0000	signed	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:	TALL SECTION		
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company,"	the designation "LECT or the	abbreviation	
Enter new principal offices address, if applicable:	·	<u> </u>	<u> </u>	
(Principal office address MUST BE A STREET ADDRESS)		70	<u> </u>	
		72.5.1.2.1.2.1.2.1.2.1.2.1.2.1.2.1.2.1.2.	<u> </u>	
Enter new mailing address, if applicable:	9472 HARDING	AVE.		
(Mailing address MAY BE A POST OFFICE BOX)	SURFSIDE, FL 3	3154		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here  Name of New Registered Agent:  New Registered Office Address:		records, <u>enter the name</u>	of the new	
	Enter Florida street address			
	Florida			
	City	Zip Coa	le	

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member Address **Type of Action** Title 1 <u>Name</u> Frank Taieb MGRM 9472 Harding Ave. ☑ Add Surfside, FL 33154 Remove ☐ Add Remove ☐ Add ☐ Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Frederic Barthe, Esq.

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee