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SECRETARY OF STATE

J. BRYAN

MAR 2 6 2009

EXAMINER

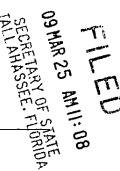
COVER LETTER

TO: Registration So Division of Con			
SUBJECT: Nationa	al Foodservice Recy (Name of Lim	clers, LLC ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	FILED 09 MAR 25 AM II: 08 SECRETARY OF STATE FALLAHASSEE, FLORID
	Eric Pinkis	,	TARY TARY TARS
		(Name of Person)	开会 建
	National Foodservice Re	cyclers, LLC	STA STA
		(Firm/Company)	
	7870 Lago Del Mar Drive	e, #123 (Address)	
		(11441403)	
	Boca Raton, FL 33433	(0) (0 1 10)	
		(City/State and Zip Code)	
For further information of	concerning this matter, please c	all:	
Eric Pinkis		at (561 ₎ 635-0441	
	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for the	he following 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)
MAIL	ING ADDRESS:	STREET/COURIER	ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



National Foodservice Recyclers, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Flor	rida Limited Liability Company)			
The Articles of Organization for this Limited Liabili	ity Company were filed on 5/02/2007	and assigned		
Florida document number <u>1.07000046293</u> Lo 70000 46293	· ₽			
This amendment is submitted to amend the followin	g:			
A. If amending name, enter the new name of the	limited liability company here:			
National Foodservice Systems, LLC				
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the design	ation "LLC" or the abbreviation		
Enter new principal offices address, if applicable	:			
(Principal office address MUST BE A STREET A	DDRESS)			
Enter new mailing address, if applicable:				
(<u>Mailing address MAY BE A POST OFFICE BOX</u>	<u> </u>			
B. If amending the registered agent and/or registered agent and/or the new registered office		enter the name of the new		
Name of New Registered Agent:				
New Registered Office Address:				
	(Enter Florida street d			
_	, Flor	ida		
	(Citv)	(Ziv 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 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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

Title .	Name	Address	<u>T</u>	pe of	Action
			_	Add	
				Remo	ve
				Add	
				Remo	ve
				Add Remo	ve
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			<u> </u>	Remo	ve
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		(s) here: (Attach additional sheets, if necessary.) FROM: National Foodservice Recyclers, LLC		_	
	lational Foodservice Systems, LLC		CREIT	09 MAR 25	71
<u> </u>		уург. 	ARY OF		m
			TATE	AM II: 08	O
Dated March 19	9 , 2009	<u>.</u>	•		
	4 //				
	Signature of a member of	or authorized representative of a member			

Page 2 of 2

Filing Fee: \$25.00