

LO7000061552

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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

All In Good Taste LLC

SUBJECT:

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:

Danah Bernal

Name of Person

Rondah Foods Corp

Firm/Company

1033 NE 17th Way Unit 1904

Address

Fort Lauderdale, FL 33304

City/State and Zip Code

rondahfoods@gmail.com

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

For further information concerning this matter, please call:

Danah Bernal

954 234 8787

Name of Person

at ()

Area Code

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 &
Certified Copy
(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/COURIER ADDRESS:

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

All In Good Taste 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 06/12/2007 and assigned
Florida document number L07000061552.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

All In Good Taste, L.L.C.

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:

10732 Wiles Rd, Coral Springs, Fl. 33076

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

1033 NE 17th Way, Unit 1904, Fort Lauderdale, Fl 33304

(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:

Danah Bernal

New Registered Office Address:

10732 Wiles Rd

Enter Florida street address

Coral Springs

City

Florida

33076

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>	<u>Address</u>	<u>Type of Action</u>
AMS	Kathy Marinelli	175 Paradise Cir, Jupiter, Fl 33458	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Danah Bernal	1033 NE 17th Way, Unit 1904	<input checked="" type="checkbox"/> Add
		Fort Lauderdale, Fl. 33304	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Ronald Medina	1033 NE 17th Way, Unit 1904	<input checked="" type="checkbox"/> Add
		Fort Lauderdale, Fl. 33304	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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TALLAHASSEE, FLORIDA

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 10/10/2019, _____.

_____, _____

 Signature of a member or authorized

Signature of a member or authorized representative of a member

Danah Berna

Typed or printed name of signee