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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Sex FOODS LLC 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:
Richard Golia Name of Person
Firm/Company
100 ShellOrake Ave. Port
Port Jefferson NY 11777 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Richard Gulia a1 (631), 828-0420
City/State and Zip Code Fish Boy FLA @ A O L. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Richard Gulia at (631) 828 - 0420 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25,00 Filing Fee & S30,00 Filing Fee & S55,00 Filing Fee & S60,00 Filing Fee, Certificate of Status Certified Copy tadditional copy is enclosed Certified Copy tadditional 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

The Articles of Organization for this Limited Liability Company were filed on 2/11/2008 and assigned Florida document number 4080000/50 46.

This amendment is submitted to amend the following:

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

The new mains be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC".

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 BOS)

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 Elarada street address.

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.

New Registered Agent's Signature, if changing 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 Type of Action Title Name Address RAYMOND BAIZ 210 S. CoCONUTPALM BLUD DAdd MGR TAVERNIER FL 33070 ☐ Change MGR Richard Gulia 100 ShellOrake Ave **⊠**∕Add Port Jefferson NY □ Add _____ Change

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Filing Fee: \$25.00