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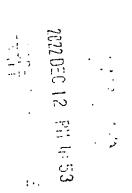
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COVER LETTER

TO:

	Registration Se Division of Cor		,	
CUD IFC	Gourmet Cl	nefs LLC		
SUBJEC'	I:	Name of Lim	nited Liability Company	
The enclo	sed Articles of	Amendment and fec(s) are sub	omitted for filing.	
Please ret	urn all correspo	ndence concerning this matter	to the following:	
		Eric Frommer		
			Name of Person	
		ATLAS Law Group LLC		
			Firm/Company	
		5829 Grand National Drive	e	
			Address	
		Orlando, FL 32819		2072 SEC
			City/State and Zip Code	030
		e.frommer@stealthmanage. E-mail address: (to be used for future annual report notification)	
For furthe	r information c	oncerning this matter, please c	all:	
Eric From	ımer		321 217-0032 at ()	ر. در
	Name o	f Person	Area Code Daytime Telephone Numb	er
Enclosed:	is a check for th	ne following amount:		
≡ \$25.0	0 Filing Fee	S30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certific	Filing Fee, ente of Status & ed Copy al copy is enclosed)
F I F	Mailing Addres Registration S Division of C P.O. Box 632 Fallahassee, F	Section orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303	810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gourmet Chefs LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company lorida document number L08 000 086 567	were filed on 9/11/2008	and assigned
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	r the abbreviation "L.L.C."
nter new principal offices address, if applicable:	5829/5847 Grand National Drive	<u> </u>
Principal office address MUST BE A STREET ADDRESS)	Orlando, Florida 32819	
Inter new mailing address, if applicable:	5829 Grand National Drive	7077 DEC
Mailing address MAY BE A POST OFFICE BOX)	Orlando, Florida 32819	12
. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the</u>	e name of the new regist
		•
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florio	da 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 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
			□Remove
			□Change
			□Add
			□Remove
			Change
			Add
			— El Remove
			□Add
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fective date, if other than the or in effective date is listed, the date must ote: If the date inserted in this blocument's effective date on the De	t be specific and cannot be prior to date of fock does not meet the applicable statut	(optional liling or more than 90 days after filing tory filing requirements, this date	g.) Pursuant to 605.020
ecord specifies a delayed effective is filed.	e date, but not an effective time, at 12:	01 a.m. on the earlier of: (b) T	he 90th day after the
December 6	2022		
人ノ	Signature of a member or authorized repro		