L08000114515

Florida Department of State
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NEXFOODS, 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:

VANESSA LAGANA
Name of Person

FOX ROTHSCHILD LLP
Firm/Company

Southeast Financial Center, 200 S Biscayne Blvd., Suite 3590
Address

MIAMI, FLORIDA 33131
City/State and Zip Code

VLAGANA@FOXROTHSCHILD.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VANESSA LAGANA at (305) 442 6544
Name of Person — 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

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

NEXFOODS, LLC

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

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12/16/2008 and assigned Florida document number L08000114515

This amendment is submitted to amend the following:

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

_____

The new name must be distinguishable and end with the words "Limited Liability Company," the word "LLC" or the abbreviation "L.L.C."

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 BOX)

_____

_____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

B. If amending the registered agent and/or registered office address in 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: _____

Street Number, Street Address

_____, Florida _____

City *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

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager/or Authorized Member being added or removed from our records.

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	CLARICE C. FLOSS	RUA PEDRO II NRO.95 CENTRO	☐ Add
		CAMPO COM, RIO GRANDE DO SUL	☒ Remove
		CEP 93700-00 BR	
MGR	TERESA BOTTCHER	350 85th Street, Apt 11	☒ Add
		Miami Beach, FL 33141 US	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to the date of this filing and cannot be more than 90 days after the date this document is filed by the Florida Department of State.)

Dated September 11 2014

Signature of a member or authorized representative of a member

CLARICE CECILIA FLOSS

Typed or printed name of signee

Filing Fee: $25.00

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