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J. BRYAN

AUG 2 5 2011

EXAMINER

COVER LETTER

	stration Section ion of Corporations		
SUBJECT: _	Tuckwell I	International L.L.C.	4
_	Name of Lin	nited Liability Company	
The enclosed A	Articles of Amendment and fee(s) are su	ubmitted for filing.	
Please return a	Il correspondence concerning this matte	er to the following:	ار بران دانها
		Chaum M. Tualaunil	SECON TO
		Shaun M. Tuckwell Name of Person	
Tuckwe		l International Catering, L.L.C	AUG 25 AM 10: 53
		Firm/Company	OF S
		15825 SW 99 Street Address	
And the state of t		Miami, FL 33196 City/State and Zip Code	
	tucky	vellintlcatering@ymail.com	
	E-mail address:	(to be used for future annual report notification	ation)
For further infe	ormation concerning this matter, please	call:	
Erin-Lynne Barrios		# ¹ \	73-6462
	Name of Person	Area Code & Daytime	Telephone Number
Enclosed is a c	heck for the following amount:	`	
\$25.00 Fili	ng Fee	\$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/COURIE Registration Section Division of Corporat	
		Clifton Building 2661 Executive Cent	er Circle

Tallahassee, FL 32301

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

Tuckwell Interna	ational Catering	, LLC	
(<u>Name of the Limited Liability Cor</u> (A Florida Limit	mpany as it now appea ted Liability Company)	irs on our records.)	
The Articles of Organization for this Limited Liability Comp. Florida document number L090000430	pany were filed on	01/13/2009	and assigned
This amendment is submitted to amend the following:			THE SECOND IN
A. If amending name, enter the new name of the limited	liability company he	<u>re</u> :	of State
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Comp	any," the designation "I	LC" or the aboreviatio
Enter new principal offices address, if applicable:	3380 NW 72	Avenue	
(Principal office address MUST BE A STREET ADDRESS	<u> </u>		
	Miami, FL 3	3122	
Enter new mailing address, if applicable:	15825 SW 9	9 Street	
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 3	3196	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address Name of New Registered Agent: New Registered Office Address:	here:	our records, <u>enter t</u>	
	E		. 000
	City	, Florida	Zip Code
Name Descriptanced Assent's Companyon of shanging Descriptanced Ass	•		-

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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager .

MGRM = Managing Member <u>Title</u> **Type of Action** <u>Name</u> Address MGRM Suzanne B. Gidwani 15825 SW 99 Street ✓ Add Miami FL 33196 Remove ☐ Add ☐ Remove ☐ Add ☐ Remove ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Shaun M. Tuckwell

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00