

FROM

Division of Corporations

FCHU OCT 20 2010 4:08/ST. A: 19/No. 160081093 P 1
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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : DAVID TORCHIN, C.P.A., P.A.
Account Number : 119990000007
Phone : (954) 472-3124
Fax Number : (954) 323-6301

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
PHANATIC FOODS, LLC

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FROM

(THU) OCT 28 2010 4:49/ST. 4:49/NO. 8160061093 P 2

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DIVISION OF CORPORATION

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

10 OCT 28 AM 8:29

Phanatic Foods, 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 09/27/2010 and assigned
Florida document number L19000100591

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 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 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: Michael P. Deugnerty

New Registered Office Address: 507 North Federal Hwy # 32

(Enter Florida street address)

Lake Worth Florida 33460

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

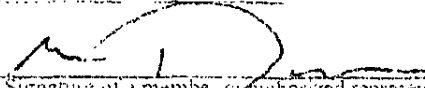
MGR = Manager

MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	William D Mitchell	507 North Federal Hwy Lake Worth, FL 33460	☒ Add ☒ Remove
MGRM	Lindsay N. Dougherty	507 North Federal Hwy #30 Lake Worth, FL 33460	☒ 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.)

Dated October 19, 2010


Signature of a member or authorized representative of a member

Michael P. Dougherty

Typed or printed name of signer

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