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(R	equestor's Name)	 		
(A	ddress)			
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J. SAULSBERRY EXAMINER DEC 29 2011

COVER LETTER

10:	Division of Co			
SUBJE	ECT:	CHEF ON	4 WHEELS LLC	
		Name of Lim	ited Liability Company	
The end	closed Articles of	f Amendment and fee(s) are su	bmitted for filing.	
Please	return all corresp	ondence concerning this matte	r to the following:	
			AHMET KARACA	
			Name of Person	
	CHEF ON 4 WHEELS LLC		2011 SE6 TALL	
			Firm/Company	DEC CRE
	1500 BAY ROAD UNIT S766			2011 DEC 27 AM 8: 2 SECRETARY OF STATE ALLAHASSEE. FLORID
			Address	E OF AR
	MIAMI BEACH 33139 FL		7 AH 8:21 RY OF STATE SEE, FLORIDA	
			City/State and Zip Code	DE 2
		E-mail address: (kkaracaa@yahoo.com to be used for future annual report notification	n)
For furt	ther information of	concerning this matter, please of	cali:	
		nmet Karaca		2337
	Name o	of Person	Area Code & Daytime Tele	phone Number
Enclose	ed is a check for t	he following amount:		
\$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 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		ration Section on of Corporations ox 6327	STREET/COURIER A Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CHEF ON 4 V				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appea Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Company	were filed on	12/06/2010	and assigned	
Florida document numberL10000124941				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	pility company he	<u>re</u> :		
The new name must be distinguishable and end with the words "Lim" "L.L.C."	ited Liability Comp	any," the designation "	LLC" or the abbreviation	
			2011 SE(
Enter new principal offices address, if applicable:		7ST STREET	> ≒ □	
(Principal office address MUST BE A STREET ADDRESS)	UNIT G-23 M	11AMI FL 33015	AND CO	
				
			11. Z	
Enter new mailing address, if applicable:			ORIGINAL PROPERTY OF THE PROPE	
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, enter	the name of the new	
Name of New Registered Agent:	· -· ·- ·			
New Registered Office Address:				
	Enter Florida 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 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 **Address** Type of Action <u>Title</u> Name 1 MGR AHMET KARACA **1500 BAY ROAD UNIT 766** ☐ Add Remove MIAMI BEACH FL 33139 **GULDEM KURTOGLU** MGR 6175 NW 167 ST UNIT G-23 ✓ Add MIAMLEL 33015 ☐ Remove ☐ Add Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) AHMET KARACA OWNED % 51 GULDEM KURTOGLU OWNED %49 11-22 2011 Dated Signature of a member or authorized representative of a member AHMET KARACA Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00