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| (Requestor's Name) | | | | |
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| (Ad | dress) | | | |
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| (Address) | | | | |
| | | | | |
| (Cit | y/State/Zip/Phone | 9 #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| | | | | |
| (Business Entity Name) | | | | |
| | | | | |
| (Do | cument Number) | | | |
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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to | Filing Officer: | | | |
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Office Use Only



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SECRETARY OF STAIL DIVISION OF CORPORATION

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COVER LETTER

| Division of Corporations |
|--|
| SUBJECT: Menucorner, com 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: |
| Danel T. Ruiz Name of Person |
| • |
| Menucorner.com LLC Firm/Company |
| |
| 2780 E. Fowler Luc #152 Address |
| |
| Tampa, F1 33612 City/State and Zip Code Aruiz @ menucorner.com E-mail address: (to be used for future annual report notification) |
| City/State and Zip Code |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Daniel T. Ruiz at (813) 992-0778 Name of Person Area Code & Daytime Telephone Number |
| Med Code de Day une relegione names |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$55.00 Filing Fee & \text{Certified Copy} (additional copy is enclosed)}\$\$ \$60.00 Filing Fee, \$\text{Certified Copy} (additional copy is enclosed)}\$\$ |

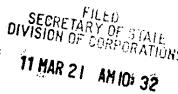
MAILING ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



| Menucorr | er.com | ny as it now appears on a clability Company) | |
|---|--------------------|--|--|
| | | | |
| The Articles of Organization for this Limited L Florida document number | iability Company | were filed on $\frac{2}{2}$ | and assigned |
| This amendment is submitted to amend the foll- | owing: | | |
| A. If amending name, enter the new name o | f the limited liab | ility company here: | |
| The new name must be distinguishable and end wi "L.L.C." | th the words "Limi | ted Liability Company," t | he designation "LLC" or the abbreviation |
| Enter new principal offices address, if applic | able: | NH | ANALY |
| (Principal office address MUST BE A STREE | T ADDRESS) | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE | <u>BOX)</u> | NA | |
| B. If amending the registered agent and/ registered agent and/or the new registered or | | | ecords, enter the name of the nev |
| Name of New Registered Agent: | N/A | | |
| New Registered Office Address: | NA | Enter F | lorida street address |
| | | | |
| | | City | , Florida 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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

| <u>Title</u> | Aanaging Member <u>Name</u> | Address | Type of Action |
|--------------|---|---|--|
| MGRM_ | Push Creative Group | 7212 Kendall Heath HWY Land Olakes, Fl 34537 | Add ⊠ Remove |
| MGRM | Andres Delgado | 2780 F. Fowler ave #152 Tampa, Pl 33612 | Add Remove |
| <u>MGRM</u> | Richard Martin | 1922 GARDEN BOWERCIRCO # 302 TAMPA FL 33619 | ∠E |
| | | | Add Remove |
| ••••• | | | Add Remove |
| | | | Add Remove |
| D. If amen | ding any other information, enter chang | ge(s) here: (Attach additional sheets, if necessary., |) |
| | | | SEGRETARY OF SOUNDSIDE OF CORPORATE AND CORP |
| Dated _M | arch 15th . 201 | <u>// </u> | AM 10 32 |
| | Signature of a member | r or authorized representative of a member | |

Page 2 of 2

Filing Fee: \$25.00