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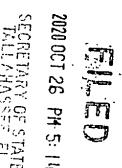
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| PICK-UP | ☐ WAIT | MAIL |
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| Special Instructions to | Filing Officer: | |
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7601 38th Avenue North St. Petersburg, Fi 33⁺10



Phone: 727,384,2111 FAX: 727,384,5165

JASON A. GOLDSTEIN, Est goldsteinlaw@tampabav.rr.com

LARRY D. GOLDSTEIN, ESQ BOARD CERTIFIED CIVIL TRIAL WORKERS' COMPENSATION Igoldsteing/tampabay.rr.com

October 20, 2020

AMENDMENT SECTION DIVISION OF CORPORATIONS P.O. Box 6327 Tallahassee, FL 32314

RE: AMERIC FOOD GROUP #3, LLC

Dear Sir/Ma'am:

Enclosed please find a Check #11860 in the amount of \$25.00 for a Filing Fee with regard to the above referenced organization with the enclosed Articles of Amendment. Upon filing, please forward all correspondence back to Mr. Wille listed on the Cover Letter.

Thank you for your attention on this matter. Should you have any questions, please do not hesitate to contact our office.

Very Truly Yours,

Jason A. Goldstein

JAG/mkj Enclosures

.. COVER LETTER

| - | ision of Cor | | | |
|--|---------------|--|---|--|
| SUBJECT: | Americ Foo | od Group #3, LLC | | |
| SOBJECT. | | Name of Lim | ited Liability Company | |
| The enclosed | l Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return | all correspo | ondence concerning this matter | to the following: | |
| | | Nicholas Wille | | |
| | | | Name of Person | |
| | | | Firm/Company | |
| | | 8750 64th Street North | | |
| | | b' II b i El 22702 | Address | |
| | | Pinellas Park, FL 33782 | City/State and Zip Code | |
| | | nick@bellaplainenursery.cc | om | |
| or further in | iformation c | E-mail address: (oncerning this matter, please c | to be used for future annual report notable: | otification) |
| Nick Wille | | | 319 360-2701 at () | |
| | Name o | f Person | Area Code Dayt | ime Telephone Number |
| Enclosed is a | check for th | ne following amount: | | |
| ■ \$25.00 F | iling Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed) | ☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) |
| | ding Addres | | Street Address: Registration S | Section |
| Division of Corporations P.O. Box 6327 | | Division of Corporations The Centre of Tallahassee | | |
| | lahassee, I | | | roe Street, Suite 810 |

Tallahassee, FL 32303

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

FILED

| | Americ Food Group #3, LLC | 2020 OCT 2.6 PH 5: 14 |
|---|---|---|
| (Name of the Lim | ited Liability Company as it now appears (A Florida Limited Liability Company) | |
| The Articles of Organization for this Limited I | Liability Company were filed on Fen | ruary 24, 2012 and assigned |
| Florida document number 1.12000026812 | _ . | |
| This amendment is submitted to amend the fol | lowing: | |
| A. If amending name, enter the new name of | of the limited liability company her | r <u>e</u> : |
| The new name must be distinguishable and contain the | words "Limited Liability Company." the de | signation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if appli | cable: | |
| Principal office address MUST BE A STRE. | ET ADDRESS) | |
| | | |
| | | |
| Enter new mailing address, if applicable: | | |
| <u>Mailing address MAY BE A POST OFFICE</u> | <u> </u> | |
| | | |
| B. If amending the registered agent and/or agent and/or the new registered office addresses | | cords, <u>enter the name of the new registe</u> |
| Name of New Registered Agent: | Jason A. Goldstein, Esq. | |
| New Registered Office Address: | 7601 38th Ave North | |
| | Enter Flori | da street address |
| | St. Petersburg | , Florida ³³⁷¹⁰ |
| | | Zip Code |

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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being adde or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|------------------|-------------|------------------------------|----------------|
| MGRM Jamie Wille | Jamie Wille | 8750 64th Street North | = Add |
| | | Pinellas Park, Florida 33782 | □Remove |
| | | | ☐ Change |
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| If amending any other informat | ion, enter change(s) here: (A | ttach additional sheets, if nec | essary.) |
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| Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De | be specific and cannot be prior to dat ock does not meet the applicable s | te of filing or more than 90 days after | onal) r filing.) Pursuant to 605.0207 (3 s date will not be listed as th |
| he record specifies a delayed effective ord is filed. | date, but not an effective time, a | it 12:01 a.m. on the earlier of: (E | 5) The 90th day after the |
| October 16 | 2020 | | |
| | | | |
| | Signature of a member or authorized | representative of a member | |
| | Nicholas M. W | √ille | |
| | Typed or printed par | | |