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B. BOSTICK
APR 1 0 2012
EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: FOR the Love Of Food, 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:
Beatoiz Baella Hemandez
For the Love of Food Firm/Company
2627 Lucerne Do.
Tallahassee Fl 32303 City/State and Zip Code
gigi address: (to be used for future annual report notification,
For further information concerning this matter, please call:
Boato'z Baella Hemande Z at 850 443-1974 The Real Code & Daytime Telephone Number 200 200 200 200 200 200 200 200 200 20
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$\frac{1}{2}\$}\$\$\$ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)}
MAILING ADDRESS: STREET/COURIER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

t:

Registration Section

TO:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

For the Love	Of Food, L	LC
(<u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appears (a Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Florida document number <u>L 120000.308</u>	Company were filed on <u>3</u>	15/12 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company	," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		No.
(Principal office address MUST BE A STREET ADL	PRESS)	N 200
		A PR
		SSS TO
Enter new mailing address, if applicable:		ng 3 m
(Mailing address MAY BE A POST OFFICE BOX)		7. 7.
		29 29
		72
B. If amending the registered agent and/or registered agent and/or the new registered office ad		records, enter the name of the new
registered agent and/of the new registered office au	uress here.	
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

<u>Title</u>	Name	<u>Address</u>	Type of Action
M <u>GRM</u>	Ximena M	Smith 1115 baton Roy	198 COURT Add 10 32305 Remove
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D. If amend		eatriz Baela der	•
<u></u>	ill mow lin	se the Manager.	<u> </u>
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Dated	Signal	are of a member or authorized representative of a me	
	Beatriz P	Saella He mandez	<i></i>

Page 2 of 2

Filing Fee: \$25.00