Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

fax Number : (850)617-6383

From:

Account Name : VICTOR LERRO & COMPANY, P.A.

Account Number : I20040000118

: (561)995-0064

Fax Number

: (561)995-7551

**Enter the email address for this business entity to be used for buture annual report mailings. Enter only one email address please. Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGNE **OLGA'S TABLE LLC**

Certificate of Status Certified Copy 0 Page Count 05 Estimated Charge \$30.00

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TO: Registration Section Division of Corporations

SUBJECT:

Olga's Table 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:

	Victor Lerro						
	Name of Person						
	Lerro & Chandross, PLL	С					
							
	50 SW 2nd Ave Ste 201						
	Address						
	Boca Raton, FL 33432		2015 JUN -				
	City/State and Zip Code						
	mcasanova@vcpa.com		JUN -				
	E-mail address:	(to be used for future annual report not	ification)				
For further information of	concerning this matter, please	call;					
Victor Lerro		561 995-0064	RIDE T				
Name o	of Person		ne Telephone Number				
Enclosed is a check for the	he following amount:						
□ \$25.00 Filing Fee	≅ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	□ \$60.00 Filing Fee,				

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

Certificate of Status

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

Certificate of Status &

Certified Copy (additional copy is enclosed)

ARTICLES OF AMENDMENT H1500013 60673 ARTICLES OF ORGANIZATION OF

-	City	, Florida Zip Code
		179
New Registered Office Address:	Enser Florida str	cet address
Name of New Registered Agent:		
registered agent and/or the new registered offic	e augress here;	RIDA
B. If amending the registered agent and/or	•	records, enter the name of the t
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		58. R
(Mailing address MAY BE A POST OFFICE BO		TA TO THE TANK THE TA
Enter new mailing address, if applicable:		2015 SECI
		
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new principal offices address, if applicabl	le:	·
The new name must be distinguishable and contain the word	ls "Limited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
A. If amending name, <u>enter the new name of th</u>	e limited liability company here:	
This amendment is submitted to amend the following	•	
Florida document number L12000117776	.	
The Articles of Organization for this Limited Liabi	ility Company were filed on 97137201	and assigned
(Name of the Limited) (A	Liability Company as it now appears on o Florida Limited Liability Company)	ur records.)
Olga's Table LLC (Name of the Limited) (A	Liability Company as it now appears on o Plorida Limited Liability Company)	ur records.)

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

Jun. 8. 2015 4:45PM LERRO & CHANDROSS PLLC

No. 8325 P. 4

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

MGR = Manager AMBR = Authorized Member H15000136667 3

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Todisco, Olga, Mgmbr Pres	4070 N Dixie Highway	
		Boca Raton, FL 33431	■ Remove
			Change
AMBR	Todisco, Frank	4070 N Dixie Highway	≅ Add
		Boca Raton, FL 33431	Remove
			Change
			□ Remove
			☐ Change
 -			SECRETAR JUN Remive
			CE. F. S. Chapper
			Q TATE DRIUA
			□ Remove
			Change
			D Add
			☐ Remove
			Change

amer	nding any o	ther infor	mation, er	iter change	e(s) here:	(Attach addi	tional sheets	if necess	o. 8325 aary.)		
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		1/		—;		•					
		J. A.	<u> </u>								
			Signature	of a member	or authorize	d representativ	e of a member	<u>_</u>			

Page 3 of 3

Filing Fee: \$25.00