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(Ad	ldress)	
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(Cit	ry/State/Zip/Phone	e #)
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J. Shiners JAN 1 5 2013

COVER LETTER

TO: Registration Se Division of Co			
	FOOD MAX LLC		
SUBJECT:	Name of Limite	ed Liability Company	· <u>·</u> ····
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspondent	ondence concerning this matter t	to the following:	
	ROUDY CHARLES		
		Name of Person	<u></u>
	WOOD FOOD MAX	LLC	
		Firm/Company	
	2291 N DIXIE HWY		
		Address	,
	POMPANO BEACH	FL 33060	
	ROUDYCHARLES@	City/State and Zip Code YAHOO.COM	
	E-mail address: (t	to be used for future annual report notification	on)
For further information	concerning this matter, please ca	all:	
KITT CHANCE MA	ARCELLUS	305 244 3467	
Name	of Person	at () Area Code Daytime Tele	ephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regis Divisi	LING ADDRESS: tration Section ion of Corporations Box 6327	STREET/COURIER Registration Section Division of Corporation Clifton Building	

Tallahassee, FL 32314

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

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

WO	CO	FO	OD	MAX	LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

·	IANILI	ADV 06 2014	
The Articles of Organization for this Limited Liability Comp	pany were filed on	and assign	ied
Florida document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited WOOD FOOD MART, LLC	liability company here:		
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company,	"the designation "LLC" or the abl	breviation
Enter new principal offices address, if applicable:	2291 N DIXIE H	IWY	
(Principal office address MUST BE A STREET ADDRESS	S) POMPANO BEA	NCH, FL 33060	
		五四 二	
Enter new mailing address, if applicable:		<u>်</u>	515
(Mailing address MAY BE A POST OFFICE BOX)		The state of the s	₩, ₽ 3
			3
		2 5 2 5	7-4
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		records, enter the name of	the nev
Name of New Registered Agent: KITT CH	HANCE MARCELLUS	1	
New Registered Office Address:	DIXIE HWY		
New Registered Office Address.	Enter	Florida street address	
POMPA	NO BEACH	. Florida 33060	
	City	, Fioriua Zip Code	
New Registered Agent's Signature, if changing Registered Ag	rent•	-	

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

Authorized Member being added or removed from our records:

MGR = Manager

Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
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Effective date, if other than the	date of filing:	(optional)
Effective date, if other than the on effective date is listed, the date	date of filing:	(optional) han 90 days after filing.) (605.0207 (2
Effective date, if other than the on effective date is listed, the date of JANUARY 08	date of filing:	(optional) han 90 days after filing.) (605.0207 (2
JANUARY 08 d	2014	(optional) han 90 days after filing.) (605.0207 (2
Effective date, if other than the one offective date is listed, the date is JANUARY 08 dROUDY CHARLES	2014	(optional) han 90 days after filing.) (605.0207 (2
JANUARY 08 ROUDY CHARLES	2014 	
JANUARY 08 ROUDY CHARLES	2014	
JANUARY 08 ROUDY CHARLES	2014 3 nature of a member or authorized representations of the company of the c	priative of a member
JANUARY 08 ROUDY CHARLES	2014 	priative of a member

Filing Fee: \$25.00

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