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COVER LETTER

TO: Registration S Division of Co			
	OOSTER LLC		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	VANESSA MONTES	3	
		Name of Person	
	ROHO KITCHEN		
	**************************************	Firm/Company	
	8338 W STATE ROA	AD 84	
	 	Address	
	DAVIE, FL 33324		
		City/State and Zip Code	
	nessy@rohokitchen.c	COM to be used for future annual report notific	ation
			ation)
For further information	concerning this matter, please ca	all:	
Vanessa Montes		954 200-2895	
Name	of Person	Area Code Daytime 1	Telephone 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)

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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION **OF**

15 MAR 31 PM 3:55

	imited Liability Company as it now ap	pears on our records.)
	imited Liability Company as it now ag (A Florida Limited Liability Compa	ny)
The Articles of Organization for this Limited	d Liability Company were filed or	MAY 12, 2014 and assigned
lorida document number L1400007617	5	
his amendment is submitted to amend the f	following:	
a. If amending name, enter the new nam	e of the limited liability compan	y here:
he new name must be distinguishable and end with	the words "Limited Liability Company,"	the designation "LLC" or the abbreviation "L.L.C.
Enter new principal offices address, if app	plicable:	
Principal office address MUST BE A STR	EET ADDRESS)	
'nter new mailing address if annlicable:		
Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFIC	 CE BOX)	
inter new mailing address, if applicable: Mailing address MAY BE A POST OFFIC	CE BOX)	
Mailing address MAY BE A POST OFFIC		
Mailing address MAY BE A POST OFFIC	nd/or registered office address	on our records, enter the name of th
Mailing address MAY BE A POST OFFICE B. If amending the registered agent a egistered agent and/or the new registered	nd/or registered office address d office address here:	on our records, enter the name of th
Mailing address MAY BE A POST OFFICE. 3. If amending the registered agent a	nd/or registered office address d office address here: JORGE MONTES	
Mailing address MAY BE A POST OFFICE B. If amending the registered agent a egistered agent and/or the new registered	nd/or registered office address d office address here: JORGE MONTES 8338 W STATE ROAD	9 84
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent a egistered agent and/or the new registered Mame of New Registered Agent:	nd/or registered office address d office address here: JORGE MONTES 8338 W STATE ROAD	

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

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member **Type of Action** Title <u>Name</u> **Address JORGE MONTES 8338 W STATE ROAD 84** MGR Add **DAVIE, FL 33324** □ Remove 8310 W STATE ROAD 84 MGR **VANESSA MONTES** _□ Add **DAVIE, FL 33324** ■ Remove ☐ Add _□ Remove _□ Add ☐ Remove _□ Add □ Remove □ Add ☐ Remove

Effective date, if other than the date of	of filing: (optional) ior to date of receipt or filed date and cannot be more than 90 days after
(The effective date must be specific, cannot be pr the date this document is filed by the Florida De	
Dated March 24	2015
Jack	South
Jack	are of a thember or authorized representative of a member
Jack	are of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00



ROHO KITCHEN

8338 W State Road 84 Davie, FL 33324

Tel 954-200-2895 Fax 954-680-7068 info@rohokitchen.com

March 24, 2015

To Whom It May Concern:

Please see attached document to amend the Articles of Organization of RED ROOSTER LLC.

- Changing address to 8338 W State Road 84, Davie, FL 33324
- Adding registered agent and MGR, Jorge Montes
- Withdrawing myself, Vanessa Montes, as agent and member.

Let me know if you have any questions. Thank you.

Daytime Phone:

954-200-2895 office 305-467-0393 cell

Return Mailing Address:

ROHO KITCHEN Attn: Vanessa Montes 8338 W State Road 84 Davie, FL 33324

Kind regards,

Vanessa Montes 954-200-2895 tel 305-467-0393 cell nessy@rohokitchen.com