150028	017
(Requestor's Name) (Address)	700301750727
(Address) (City/State/Zip/Phone #)	
PICK-UP WAIT MAIL (Business Entity Name)	07/31/1701012013 <b>**</b> 25.00
(Document Number) Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	FILED 17 JUL 31 PH 3:36 SEGRE FARY OF STATE TALLAHASSEE, FLORIDA
Office Use Only	
	D SCOTT AUG 2 2017

		COVER LETTER		
TO: Registration Sec Division of Corp				
	•			
SUBJECT:	JRMET LLC			
	Name of Lin	ited Liability Company		
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspor	idence concerning this matter	to the following:		
	JULIANA DOS SANTOS			
		Name of Person		-
	GFS TAX & ACCOUNTI	NG SERVICES		
		Firm/Company		-
	2001 W CYPRESS CREE	K ROAD STE 102N		
		Address		
	FORT LAUDERDALE, F	L 33309		SECT 1
		City/State and Zip Code		
	GIL611@LIVE.COM	to be used for future annual report no	11(C	
For further information co	ncerning this matter, please c		(incation)	PH 3
JULIANA DOS SANTOS		954 6878952		30
Name of	·····	at ()	me Telephone Number	
Name of	1 (1500)	Alea Code - Dayin	me refeptione sumber	Ĩ
Enclosed is a check for the	e following amount:			
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &
Registra	NG ADDRESS: tion Section of Corporations	Registration Sect Division of Corpo		
	see, FL 32314	Clifton Building 2661 Executive C Tallahassee, FL 3		

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KIOSK GOURMET LLC	¢
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#### (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02/16/2015	and assigned
Florida document number <u>L15000028947</u>	
This amendment is submitted to amend the following:	

### A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

### Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

\_

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office	address on o	ur records,	enter the name of the new
registered agent and/or the new registered office address here:			
			For p D
Name of New Registered Agent:		<u> </u>	Eu w

New Registered Office Address:

Enter Florida street address

Florida \_\_\_\_\_ Zip Code

5

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.

City

If Changing Registered Agent, Signature of New Registered Agent

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

## MGR = Manager AMBR = Authorized Member

.

<u>Title</u>	Name	<u>Address</u>	<b>Type of Action</b>
AMBR	Oxford Marketing Consulting Inc	2578 Nw 63rd Lane	🗅 Add
		Boca Raton, FL 33496	Remove
			Change
	<u>_</u>	. <del></del>	🗆 Add
			Remove
			🔲 Add
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			Add
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	(Attach add	itional sheets if necessary.)	
f amending any other informati	ion, enter change(s) here: (Attach addi		
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man at the life show show sho	a data of filing:	(optional)	10
(If an effective date is listed, the date mu	e date of filing: st be specific and cannot be prior to date of filing lock does not meet the applicable statutory	or more than 90 days after filing.) Pursuan	t to 605.0207 ( be listed as ti
Note: If the date inserted in this b document's effective date on the D	bepartment of State's records.		
the record specifies a delaye ) The 90th day after the rec	d effective date, but not an effecti	ve time, at 12:01 a.m. on the	earlier of:
	.014 13 mea.		
Dated	2017		
	$\sim 11/$		
	Signature of a member or authorized represen	tative of a member	
CARLO BARBIERI	Typed or printed name of sign	nce	
	Page 3 of 3		
	Filing Fee: \$25.00		ľ
			E.