L15000059496

(Daniel Mark)				
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SECRETAKY OF STATE TALLAHASSEE, FLORIDA

15 JUN -1 PM 3: 43

2015 JUN-1 AM 4:33

J. HARRIE

COVER LETTER

TO: Registration Section of Corp.			
SUBJECT:	Revival Mea Name of Lim	As of Florida ited Liability Company	LIC
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	Silvi	o Thomas Pelli-	zzetti
·	Reviva	Meats of FI	orida, LLC
	<u>P.o.</u>	Box 221 Address	
		r field Beach, F City/State and Zip Code	
	E-mail address: (Dellizzettise yak	cation)
For further information cou	ncerning this matter, please ca		
5. Tom Pel	lizzetti Person	at (<u>479</u>) <u>790 -</u> Area Code Daytime	8/33 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



May 15, 2015

SILVIO THOMAS PELLIZZETTI P.O. BOX 221 DEERFIELD BEACH, FL 33443

SUBJECT: REVIVAL MEATS OF FLORIDA LLC

Ref. Number: L15000059696

We have received your document for REVIVAL MEATS OF FLORIDA LLC and your check(s) totaling \$80.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please indicate if you are adding, removing, or changing MGR Tall Pines Beef, LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 015A00010296

2015 JUN - 1 AM 4: 33



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

April 28, 2015

SILVIO THOMAS PELLIZZETTI P.O. BOX 221 DEERFIELD BEACH, FL 33443

SUBJECT: REVIVAL MEATS OF FLORIDA LLC

Ref. Number: L15000059696

We have received your document for REVIVAL MEATS OF FLORIDA LLC and your check(s) totaling \$80.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 115A00008682

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Revival Meats o-	
The Articles of Organization for this Limited Liability Company Florida document number	SSEE FLOR
The new name must be distinguishable and contain the words "Limited Liab Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ility Company," the designation "LLC" or the abbreviation "L.C." 2569 RM Ward Road Westville, FL 32464
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 221 Deerfield Boach, FL 33443
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he	office address on our records, <u>enter the name of the new</u> re:
-	5 NE 2 ND ST Apt #4
Deer	Geld Beach, Florida 3344/ 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 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 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 Title Address Type of Action Name Pelagic Marketing 1925 NE 2 ST. #4 Dadd
Partners, LLC Deerfield Beach FL Remove MGR Change □ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove Change NHASSEE THE ☐ Change □ Add ☐ Remove ☐ Change

. If amending any other information, enter change(s) here: (Attach additional sheets, if n	ecessary.)
	.
	·
Effective date, if other than the date of filing:	ptional) After filing.) Pursuant to 605.0207 (3)() After this date will not be listed as the
the record specifies a delayed effective date, but not an effective time, at 12:0) The 90th day after the record is filed.	1 a.m. on the earlier of:
Dated May 29th, 2015.	
Signature of a glegiber or authorized representative of a member	
Silvio Thomas Pellizzetti	CRETAL CAHA
Typed or printed name of signee	-1 RYO
Page 3 of 3	AM 4: OF STA