L15000127338

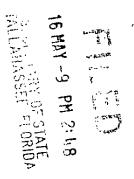
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MAY 11 2016 N. CAUSSEAUX

COVER LETTER

TO:	Registration Sec Division of Corp		
CHIDIO		ribbean Restaurant LLC	
SUBJE	C1:	Name of Limited Liability Company	
The en	closed Articles of A	Amendment and fee(s) are submitted for filing.	
Please	return all correspor	ndence concerning this matter to the following:	
		Annie C Jean Simon	
		Name of Person	
		Bination .	
		Firm/Company . 200 Waterway Village Apt 206	
		Address	
		Greenacres FL 33413	
		City/State and Zip Code anniesimon11@aol.com	
		E-mail address: (to be used for future annual report notification)	
For fur	ther information co	oncerning this matter, please call:	
Annie	Jean Simon	561 7274828 at ()	
	Name of	f Person Area Code Daytime Telephone Number	
Enclose	ed is a check for th	ne following amount:	
□ \$2:	5.00 Éiling Fee	S30.00 Filing Fee & Certificate of Status S55.00 Filing Fee & Certificate of Status Certificate of Status (additional copy is enclosed) S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is encl	

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 TO ARTICLES OF ORGANIZATION OF

Tatie's Caribbean Restaurant LLC				
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	nny as it now appears on our records. Liability Company))		
The Articles of Organization for this Limited Liability Company Florida document number L15000127338	were filed on July 27, 2015	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
Yumfie Organic Kitchen LLC				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	200 Waterway Village	•		
(Principal office address MUST BE A STREET ADDRESS)	Apt 206	6		
	Greenacres, Fl, 33413	The same of the sa		
		Control of the contro		
Enter new mailing address, if applicable:	200 WaterwayVillage	HO R F		
(Mailing address MAY BE A POST OFFICE BOX)	Apt 206	F9 2 7		
	Greenacres, Fl, 33413	RRIDE S		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent:		enter the name of the n		
New Registered Office Address:	Enter Florida street address			
	Florida			
	City	Zip Code		
New Desistand Amentle Circumture 16 shoulder Desistand Ament				
New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent:	, Florida			

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			
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			Change
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ffective date, if other than an effective date is listed, the date locate. If the date inserted in thi ocument's effective date on the	must be specific and canno s block does not meet th	t be prior to date of fili ne applicable statutor	ig or more than 90 days	optional) after filing.) Pursuant to 605 , this date will not be liste	5.0207 ed as
e record specifies a dela The 90th day after the	yed effective date, record is filed.	but not an effec	tive time, at 12:0	01 a.m. on the earli	er o
May 5th	201	16			
/Δ., _		·			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00