

# L15000174558

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(Requestor's Name)

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(City/State/Zip/Phone #)

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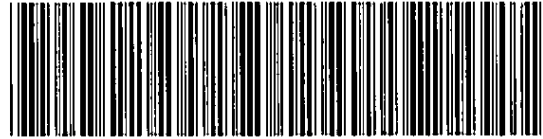
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\_\_\_\_\_  
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## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SARASOTA ITALIAN FOOD PRODUCTION LLC

SUBJECT: \_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

EDUARDO UELTSCH

\_\_\_\_\_  
Name of Person

UELTSCHI&CO

\_\_\_\_\_  
Firm/Company

32 S OSPREY AVE, STE 101

\_\_\_\_\_  
Address

SARASOTA, FL 34236

\_\_\_\_\_  
City/State and Zip Code

RA@UELTSCHI.CO

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EDUARDO UELTSCHI

941

5498549

\_\_\_\_\_  
at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime 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

**TO  
ARTICLES OF ORGANIZATION  
OF**

SARASOTA ITALIAN FOOD PRODUCTION LLC

(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 10/08/2015 and assigned  
Florida document number 1.15000174558

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 "L.L.C."

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

5342 CLARK RD, PMB 1070, SARASOTA, FL 34233

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

5342 CLARK RD, PMB 1070, SARASOTA, FL 34233

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

ELENA DE LUCA

New Registered Office Address:

4955 OLDIHAM STREET

*Enter Florida street address*

SARASOTA

*City*

Florida

*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.*

Elena De Luca

**If Changing Registered Agent, Signature of New Registered Agent**

or removed from our records:

**MGR = Manager**

**AMBR = Authorized Member**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR M	GIORGIO GUASTIELLA	1936 HILLVIEW STREET, SARASOTA, FL 34239	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	GIULIA TUFANO	4955 OLDFHAM STREET, SARASOTA, FL 34238	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated 6/18/2019

Elena De Luca  
Signature of a member or authorized representative of a member  
ELENA DE LUCA  
\_\_\_\_\_  
Typed or printed name of signer