From: Natalie Burns

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Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BURNS LAW OFFICES, P.A.

Account Number: I20140000036 : (305)733-8223 Phone : (866)883-7019 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:		

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MIAMI PRO CATERERS LLC

Certificate of Status	0
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ARTICLES OF AMENDMENT

(((H22000147215 3)))

TO ARTICLES OF ORGANIZATION OF

MIAMI PRO CATERERS LLC			
(Name of the Limit	ed Liability Company as it now app. (A Florida Limited Liability Company	cars on our records.)	
The Articles of Organization for this Limited L	iability Company were filed on	10/28/2015 and ass	signed
Florida document number L15000183113	,		
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liability company	here:	
The new name must be distinguishable and contain the v	ords "Limited Liability Company." th	e designation "LLC" or the abbreviation "L	.L.C."
Enter new principal offices address, if applic	eable:	: - :	202
(Principal office address MUST BE A STREE	<u> TADDRESS)</u>		2) P
			7
		· ·	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	4: 2:	
			
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office address on ou ss here:	r records, <u>enter the name of the ne</u>	w registere
Name of New Registered Agent:	JENNY E. ARRAIZ		
New Registered Office Address:	7500 NW 25TH STREET, SU	ITE 103	
The Management of the Control of the	Enter I	Florida street uddress	
	MIAMI	, Florida 33122	
	City	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

To +18506176383

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DocuSign Envelope ID: 81D9A27E-4B45-49B0-B995-3CE814001E2F Hamenung Aumorized Person(s) aumorized to manage, enter the title, name, and address of each person being added (((H22000147215 3)))

From: Natalie Burns

MGR = Manager

AMBR = Authorized Member

or removed from our records:

<u>Title</u>	Name	Address	Type of Action
P	F & B WHOLESALERS LLC	7500 NW 25TH STREET	
		SUITE #103	■Remove
		MIAMI, FL 33122	□ Change
AMBR	LA GOCHA LLC	2375 SW 125 CT	
		MIAMI, FL 33175	
			□Change
			□Add
			□Remove
			☐ Change
			□Add
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			□Remove
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			_ 🗆 Change

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2022-04-22 21:16:05 GMT

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From; Natalie Burns

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ite: If the	ate, if other than the date date is listed, the date must be date inserted in this block effective date on the Department.	: does not meet the app	sticable statutory ii	(option more than 90 days after ling requirements, this	nnal) filing.) Pursuant to 605.020 date will not be listed a
ecord spe is filed.	erfies a delayed effective d	ate, but not an effectiv	e time, at 12:01 a r	n on the earlier of (b) The 90th day after the
ited	APRIL 22	2022			
	DocuSigned by				
_		gnature of a member or a	uthorized representat	ive of a member	