

4/22/22, 5:13 PM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
L15000183113

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((H22000147215 3))



H220001472153ABCY

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : BURNS LAW OFFICES, P.A.
Account Number : I20140000036
Phone : (305)733-8223
Fax Number : (866)883-7019

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APR 25 2022

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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Page Count	03
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APR 27 2022
C. BRUMBLEY

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

((H22000147215 3)))

MIAMI PRO CATERERS 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 10/28/2015 and assigned Florida document number L15000183113.

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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APPROVED

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: JENNY E. ARRAIZ


New Registered Office Address: 7500 NW 25TH STREET, SUITE 103

Enter Florida street address

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.

DocuSigned by


If Changing Registered Agent, Signature of New Registered Agent

((H22000147215 3)))

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If attaching Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: (((H22000147215 3)))

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
P	F & B WHOLESALERS LLC	7500 NW 25TH STREET	<input type="checkbox"/> Add
		SUITE #103	<input checked="" type="checkbox"/> Remove
		MIAMI, FL 33122	<input type="checkbox"/> Change
AMBR	LA GOCHIA LLC	2375 SW 125 CT	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33175	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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