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(Re	equestor's Name)	
(Ad	idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

SUBJECT:	JAMA	ICAN TASTEE PATTIES DI	STRIBUTION, LLC		
		Name of Lim	ited Liability Company	·	
The enclosed A	Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return a	ll correspoi	ndence concerning this matter	to the following:		
		LAI	NCELOT WILLIAMS		
			Name of Person		
		JAMAICAN 1	TASTEE PATTIES DISTR	LIBUTION, LLC	
			Firm/Company		
		13220 S	W132nd AVENUE, SUI	TTE 8	
			Address		
		MIAMI, FLORIDA 33186			
			City/State and Zip Code lanceprt@bellsouth.net		_
		E-mail address: (to be used for future annual re	eport notification)	
For further info	ormation co	ncerning this matter, please ca	all:		
LA	NCELOT	WILLIAMS	305 233- at ()	8272	
	Name of	Person	Area Code	Daytime Telephone Nu	ımber
Enclosed is a c	heck for the	e following amount:			
■ \$25.00 Fili	ing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	Cer (Sed) Cert	00 Filing Fee, tificate of Status & tified Copy titional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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

JAMAICA TA	ASTEE PATTIES	DISTRIBUTION, LLC		
(Name of the Limited	d Liability Compa A Florida Limited I	ny as it now appears on our re- Liability Company)	cords.)	
The Articles of Organization for this Limited Lia	bility Company	were filed on MARCH 10,	2016	and assigned
Florida document number L-16000049641				
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
SAME				さ
he new name must be distinguishable and contain the wo	rds "Limited Liabil	ity Company," the designation "	LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		13220 SW 132nd		
Principal office address MUST BE A STREET		SUITE #8		
		MIAMI, FLORIDA, 33186	5	
				ري دي دي
Enter new mailing address, if applicable:		CAME ACADOME		
Mailing address MAY BE A POST OFFICE B	(OX)	SAME AS ABOVE	 	··
				
B. If amending the registered agent and/o egistered agent and/or the new registered off			ords, <u>ent</u>	er the name of the
Name of New Registered Agent:	LANCELOT	WILLIAMS		<u>, </u>
New Registered Office Address: 13220 SW 132n		nd AVENUE, SUITE #8		
		Enter Florida street ac	ldress	
	MIAMI		, Florida	33186
		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.

Lancelet Williams
If Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	LANCELOT WILLIAMS	13220 SW 132 AVE., #8	
		MIAMI, FLORIDA 33186	Add
		MIAMI, FLORIDA 33180	☐ Remove
			☐ Change
MGR	DONNA LAWRENCE	13331 SW 74 STREET, MIAMI, FL 33183	
	12 33163	Add	
			Remove
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fective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date of filing	(optional) g or more than 90 days after filing.) Pursuant to 605.020
ote: If the date inserted in this block does not meet the applicable statutory cument's effective date on the Department of State's records.	filing requirements, this date will not be listed a
cument's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an effect The 90th day after the record is filed.	ive time, at 12:01 a.m. on the earlier o
10-10-2018	
	
Langlat Willing Signature of a member or authorized represent	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00