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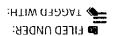
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COVER LETTER

TO:	Registration Sec Division of Corp	porations	
CUDIE	NV Food En	nterprises, LLC	
SUBJE	Name of Limited Liability Company		
The end	closed Articles of A	Amendment and fee(s) are submitted for filing.	
Please	return all correspon	ndence concerning this matter to the following:	
		Clark Van Coyle, Jr.	
		Name of Person	
		NV Food Enterprises, LLC	
		Firm/Company	
		4360 Lilac Street, Unit C	
		Address	
		Palm Beach Gardens, FL 33410	
		City/State and Zip Code	
		gastrogeeks8@gmail.com E-mail address: (to be used for future annual report notification)	
For fur	ther information co	oncerning this matter, please call:	
Clark V	Van Coyle, JR.	561 667-1453 at (
	Name of	Person Area Code Daytime Telephone Number	
Enclose	ed is a check for the	e following amount:	
■ \$ 25	5.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, SENTHS Certificate of Status Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, SENTHS Certificate of Status & XL Certified Copy (additional copy is enclosed)	

Tallahassee, FL 32301

BOOT SIE



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2017 FEB 24 AM 11:53 NV Food Enterprises, 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 4/12/16 Florida document number L16000071965 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) 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: New Registered Office Address: Enter Florida street address , Florida City

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

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	Natasha Coyle	4360 Lilac Street	Add
		Unit C	☐ Remove
		Palm Beach Gardens, FL 33410	☐ Change
			Add
			Remove
			☐ Change
			Remove Control Change
			Change 53
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Typed or printed name of signee

Filing Fee: \$25.00