1160000 83682

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COVER LETTER

то:	Registration Division of C	s Section Corporations
SUBJE	CT.	CRIOLLOS FOOD USA, LLC
SOUTE	CI	Name of Limited Liability Company
The enc	losed Articles	of Amendment and fee(s) are submitted for filing.
Please re	eturn all corre	spondence concerning this matter to the following:
		ROBERT C. ARNOLD
		Name of Person
		THE VICTORIA LAW GROUP
		Firm/Company
		80 SW 8th ST SUITE 2000
		Address
		MIAMI, FL 33130
		City/State and Zip Code
		bob the victoria Lawgroup.com E-mail address: (to be used for future annual report notification)
F== 641	h	
roi iuni	ner intormatio	n concerning this matter, please call:
RC	DBERT C.	ARNOLD at (305) 602 9099
	Nam	e of Person Area Code Daytime Telephone Number
Enclosed	d is a check fo	or the following amount:
□X \$2 5.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status □ \$55.00 Filing Fee & Certificate Of Status Certificate Of Status & Certificate Of Status & Certified Copy (additional copy is enclosed)
	Regi Divi P.O.	ILING ADDRESS: istration Section sion of Corporations Box 6327 ahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CRIOLL	OS FOOD USA, LLO		
(<u>Name of the Limited L</u> (A F	ability Company as it now appoint a limited Liability Compar	pears on our records.)	
The Articles of Organization for this Limited Liabil Florida document number <u>L16000083682</u>	ity Company were filed on	4/29/2016	and assigned
This amendment is submitted to amend the followir	ng:		
A. If amending name, enter the new name of the	•	y here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," d	he designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable	: <u></u>	<u> </u>	
(Principal office address MUST BE A STREET A	DDRESS)	·	20
			9 SEP 13
Enter new mailing address, if applicable:		-	νη: Δ γ ² 11
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>		T: -II # 1
			<u> </u>
			7
B. If amending the registered agent and/or registered agent and/or the new registered office		on our records, ente	r the name of the new
registered agent allows the new registered office	add comerci		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter i	Florida street address	
_		, Florida	
	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

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

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	FRANCOIS	9110 NW 105th WAY	Ø Add
	SIMONPIETRI	MEDLEY, FL 33178	□ Remove
	CIRIGLIANO		☐ Change
_MGR	JORGE M. ALFONSO	13272 SW 54 COURT	
		MIRAMAR, FL 33027	Remove
			Change
			
			□ Remove
			Change
			☐ Remove
			□ Change
			
			Remove
			Change
			🗖 Add
			Remove

D. II amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
·	
	
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Note: If the	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 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as effective date on the Department of State's records.
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of day after the record is filed.
	September 3, 2019
Dated	
	M.
_	Signature of a member or authorized representative of a member
	STEPHEN A. BUESO
_	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00