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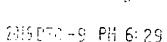
Division of Corporations		
SUBJECT: TALIAN FOOD EXCELLENCE LLC Name of Limited Liability Company		
The enclosed Articles of Amendment and fee(s) are submitted for filling.		
Please return all correspondence concerning this matter to the following:		
SIAMPAOLO DEL NERO Name of Person		
ITALIAN FOOD EXCELLENCE LLC		
1329 AUDN RD Address MIATI BENCH FL 33139 City/State and Zip Code ITFOODEXCELLENCE G GMAIL. Code E-mail address. (to be used for future annual report notification)		
MIANIBENCH FL 33139		
ITFOODEXCELLENCE G 9 MAIL. COME that and address. (to be used for future annual report notification)		
For further information concerning this matter, please call;		
at ()		
Enclosed is a check for the following amount:		
S25 00-Filing Fee S30,00 Filing Fee & S55.00 Filing Fee & S60,00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)		
Mailing Address: Registration Section Street Address: Registration Section		

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ITALIAN FOOD E	XCELLENCE LLC
(<u>Name of the Limited Liability Company as it</u> (A Florida Limited Liability	Company)
The Articles of Organization for this Limited Liability Company were Florida document number $\underline{L16000163773}$	filed on $\frac{08/31/2516}{2000}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	ompany here:
The new name must be distinguishable and contain the words "Limited Liability Con	
Enter new principal offices address, if applicable:	31 JEFFERSON AVE
(Principal office address MUST BE A STREET ADDRESS)	MAMIBEACH, FL 3313P
Enter new mailing address, if applicable:	POBOX 398327 MIANI BEACH, FL 33239
(Mailing address MAY BE A POST OFFICE BOX)	MAMI DEACH + (S) Z)
B. If amending the registered agent and/or registered office addres agent and/or the new registered office address here:	ss on our records, enter the name of the new registered
Name of New Registered Agent: 51A	MPAOLO DEL NERO
New Registered Office Address: 531 JEFFE	RSON AVE MIAMI BEACH FL 33136 Enter Florida street address

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

Page 1 of 3

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 Type of Action Title **Address** <u>Name</u> GIAMPAOLO DEL NERO PO BOX 3983 27 = AND MIAMI BEACI FL 33239 = Remove Change POBOX 398727 SM MATTED SOLDATINI MGR MIAMO BEACH FL EREMOVE 33239 ____ _ _ _ Change 1329 ALTON RD EAD ANBR ANNACIAUDIA PORTOGHE KE MIATI BEACY, FL 3317 Remove ______ □Change _____ Remove

Page 2 of 3

Effective date, if other than the date of filing: (aptional) I an effective 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 02 Note: (I the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier. The 90th day after the record is filed. Dated Signature of a member or authorized representative of a member.		
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