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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GREAT FOOD AND FRIENDS LLC

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SECRETARY OF STATE
FALLAHASSEE, FLORID

## STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.  FIRST: The name of the limited liability company is:  Great Food and Friends LLC						
SECOND: The Florida Docum		The Florida Document number of the limited	l liability company is: L170000	12048		
THIRD: Document to be co		Document to be corrected is: Articles C	f Organization			
(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT						
X		s an incorrect statement. The incorrect stater at the as follows:	nent, the reason the statement is incorr	ect, and the corrected		
	The m	ailing address for the LLC was incorre	ctly listed as P.O. Box 2566, Sar	asota, FL 34230		
	The	corrected mailing address is:	P.O. Box 3566, Sarasot	a, FL 34230		
	<u>OR</u>			<u> </u>		
	appropriate correction are					
	<u>OR</u>		as FT - 15 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
	The elec	tronic transmission of the record was defecti	/е.			
	<del></del>	1 MM	2/15/	17		
Signature of Authorized Representative Date  Signature of new registered agent, if applicable :( NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).						
I hereb provisi obligat reflect	y accept to ons of all tions of my	Agent's Signature, if changing Registered Aphe appointment us registered agent and agre statutes relative to the proper and complete position as registered agent as provided for in the registered office address, I hereby con	e to act in this capacity. I further agre performance of my duties, and I am fan in Chapter 605, F.S. Or, if this docum	nillar with and accept the sent is being filed to merely		
	Registered A gent's Signature					
		Filing Fee: Certified Copy:	\$25.00 \$30.00 (optional)			