## L17000214991

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## **COVER LETTER**

TO:

Registration Section Division of Corporations

BUDDY R Subject:	EALTY, LLC		
30b3EC1	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Renata F. Casella, Esq.		
		Name of Person	
	Veneruso, Curto, Schwartz	z & Curto, ELP	
		Firm/Company	<del></del>
	35 East Grassy Sprain Roa	id, Suite 400	
		Address	
	Yonkers, NY 10710		
		City/State and Zip Code	
	rcasella@veselaw.com		
	E-mail address: (	to be used for future annual report not	titication)
For further information c	concerning this matter, please co	all:	
Renata F. Casella, Esq.		914 779-1100	
Name c	rf Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Sc Division of Co The Centre of 2415 N. Monro	rporations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RIB ROLLS, LLC

(Name of the Limite	d Liability Compa A Florida Limited	any as it now appears on our records Liability Company)	<u>.</u> )	
The Articles of Organization for this Limited Lia Florida document number L17000214991	i	ınd assigned		
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
The new name must be distinguishable and contain the wo	ords "Limited Liabi	lity Company," the designation "LLC"	or the abbrevia	tion "L.L.C."
Enter new principal offices address, if applica	ble:	77 Harbor Drive, #84		
(Principal office address MUST BE A STREET	Key Biscayne, FL 33149			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE B	<u>80X)</u>			
B. If amending the registered agent and/or re agent and/or the new registered office address Name of New Registered Agent:	here:	address on our records, <u>enter t</u>	he name of t	2022
New Registered Office Address:	77 Harbor Drive, #84		•	72° 72°
New Wegistered Street Hadress.		Enter Florida street address		9
	Key Biscayne	, Flor	rida <u>33149</u> (	
Now Designated Asset's Signature of sharping D.		Ciţy	rida <u>33149 C</u> <i>Zij</i>	Code
New Registered Agent's Signature, if changing Real hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this contains.	l agent and agre r and complete tered agent as p	ee to act in this capacity. I furt performance of my duties, and provided for in Chapter 605, F	ther agree to U am famili S. Or, if this	A Comply with the ar with and state of the comply with and state of the complete is the complete of the comple

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>	Address	Type of Action
	<del></del>		□Add
			□Remove
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			□Remove
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			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: \_\_\_\_\_\_\_\_ (optional)
(If 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 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated \_\_\_\_\_ January 10 Signature of a member or authorized representative of a member Renata F. Casella, Authorized Representative Typed or printed name of signee

Filing Fee: \$25.00