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3. PRATHER

COVER LETTER

Div	ision of Corp	orations			
SUBJECT:	BEEF WORL	.D LLC			
		Name of Lim	ited Liability Company		
The enclosed	Articles of A	mendment and fee(s) are sub-	mitted for filing.		
Please return	all correspond	dence concerning this matter	to the following:		
		JOSE S MENDOZA CAST	ΓRO		
			Name of Person		
			Firm/Company		
		1335 S FLORAL AVE			
		BARTOW, FL. 33830	Address	·	
			City/State and Zip Code		
		E-mail address: (to be used for future annual rep	ort notification)	
For further in	nformation cor	ncerning this matter, please ca	all:		
JOSE S MEI	NDOZA CAS	TRO	at (407)	448 2984	
	Name of I	Person	Area Code	448 2984 Daytime Telephone Number	
Enclosed is a	check for the	following amount:			
ઇ \$ 25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certified (of Status &

MAILING ADDRESS:

Registration Section

TO:

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

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BEEF WORLD LLC			E 8 "
(Name of the Lim	ited Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)	22 22
The Articles of Organization for this Limited I Florida document number L18000088360		iled on APRIL 09, 2018	Sund as Rened C
This amendment is submitted to amend the fol	lowing:		THE STATE OF
A. If amending name, enter the new name	of the limited liability co	mpany here:	
The new name must be distinguishable and contain the	words "Limited Liability Com	pany," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)			
B. If amending the registered agent and registered agent and/or the new registered of		ddress on our records, <u>ent</u>	er the name of the new
Name of New Registered Agent:	JOSE S MENDOZA C	ASTRO	
New Registered Office Address:	1335 S FLORAL AVE		
		Enter Florida street address	
	BARTOW	, Florida	
	Cit	···	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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	EDUARDO E MEJIAS	1001 TANAGER LN	
		WINTER HAVEN, FL. 33880	□ Add
			■ Remove
			Change
MGR	JOSEFINA GARCIA	1335 S. FLORAL AVE	
		BARTOW, FL. 33830	
			☐ Remove
			☐ Change
		~~~	Remove
			☐ Change
			☐ Remove
			☐ Change
			Add
			☐ Remove
			Change
			☐ Remove
			Change

transforms any other morning	ation, enter change(s) here: (Attach additional she	can y necessary.
		
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	ust be specific and cannot be prior to date of filing or more than solock does not meet the applicable statutory filing require	
the record specifies a delaye) The 90th day after the re	ed effective date, but not an effective time, at cord is filed.	t 12:01 a.m. on the earlier (
OCTOBER 23	2018	201
((()	//	2018 OCT SECRE TALL
/ /// //	Signature of a member or authorized representative of a men	حصد است بیری
JOSE S MENDOZA O	'ASTRO	PA II
SAME O BILLION CAN	Typed or printed name of signee	m _{co} o

Page 3 of 3

Filing Fee: \$25.00