

L18000134297

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

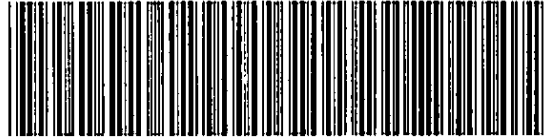
(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 SEP 30 A 10:36
CLERK OF STATE
TALLAHASSEE, FLORIDA

LLC
Amend.

OCT 12 2020

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 15, 2020

TALITA BENDILATTI
7450 DR PHILLIPS BLVD, STE 303
ORLANDO, FL 32819

SUBJECT: PERSONAL CHEF SERVICES LLC
Ref. Number: L18000134297

We have received your document for PERSONAL CHEF SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6842.

Deborah Bruce
Corporate Records Supervisor II

Letter Number: 520A00017553

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PERSONAL CHEF SERVICES LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

TALITA BENDILATTI

Name of Person

CONNECTION CONSULTING, LLC

Firm/Company

7450 DR PHILLIPS BLVD, STE 303

Address

ORLANDO, FL 32819

City/State and Zip Code

CONTACT@CONNECTIONACCOUNTING.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TALITA BENDILATTI

407

704-4929

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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**

PERSONAL CHIEF SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/30/2018 and assigned Florida document number L18000134297.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: CONNECTION CONSULTING, LLC

New Registered Office Address: 7450 DR PHILLIPS BLVD, STE 303

Enter Florida street address

ORLANDO, Florida 32819
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.

Thumy Bindi Ratti

If Changing Registered Agent, Signature of New Registered Agent

