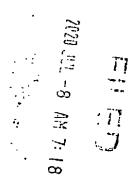
L18000282611

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AUG 1 9 2020 S. YOUNG

COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

Grand Foo	ds Distribution LLC		
30B3ECT.	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:	
	Davey T. Jay, Esq.		
		Name of Person	
	Meehle & Jay, PA		
		Firm/Company	
	1215 E Concord Street		
		Address	
	Orlando, FL 32803		
		City/State and Zip Code	
	E-mail address: (to be used for future annual report noti	fication)
For further information o	oncerning this matter, please c	all:	
Davey T. Jay		407 792-0790 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	ne 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		<u>Street Address:</u> Registration Se	ction
Division of C		Division of Cor	
P.O. Box 632	-	The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Grand Foods Distribution LLC			•	
(Name of the Limited (A	<mark>Liability Compa</mark> Florida Limited I	ny as it now appears on liability Company)	our records.)	
The Articles of Organization for this Limited Liab Florida document number 1.18000282611	ility Company 	were filed on 12/07/2	018	် ထ and assigned
This amendment is submitted to amend the following	ing:			
A. If amending name, <u>enter the new name of th</u>	e limited liab	ility company here:		
The new name must be distinguishable and contain the word	s "Limited Liabil	lity Company," the design	ation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		37 N Orange Avenue		
		Suite 333		
		Orlando, FL 32801		
Enter new mailing address, if applicable:		37 N Orange Avenue	٤	
(Mailing address MAY BE A POST OFFICE BO	OX)	Suite 333		
many manths (11.17 DE. 17 COT OF 17 COT OT OF 17 COT OF 17 COT OT OT 17 COT OT OT 17 COT OT OT 17 COT OT 17 COT OT 17 COT OT OT 17 COT		Orlando, FL 32801		
B. If amending the registered agent and/or registered affice address because it is a superior of New Registered Agent:			ds, <u>enter the name</u>	of the new register
Name Danistand Office Address	1215 E Concor	d Street		
New Registered Office Address:	-	Enter Florida si	treet address	•
	Orlando		Florida 3280)3
		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.

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
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<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
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ective date, if other t	han the date of filing:			(optional)	
n efficative data is listed, the	date must be specific and c in this block does not me	ennot be prior to date	of filing or more than	90 days after filing.) Proceedings this date wi	ursumm to 605.020° Il not be listed as
cument's effective date	on the Department of Sta	ite's records.	and the second section		
	d effective date, but not a	n effective time, a	12:01 a.m. on the	earlier of: (b) The 9	Oth day after the
is filed.					
June 30		2020			
ited	1711 - 1	 '			
	11.12				
	Signature of a m	ember or authorized	representative of a m	ember	 ·
Maria Dalas					
Mousa Dajani					

Filing Fee: \$25.00