1190000 941995

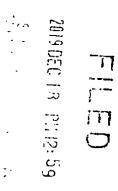
(Requestor's Name)
(Address)
(Address)
(,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800337845988

12/18/19--01014 -- 010 **25.16



Y SULKER Lali 6 202)

Registration Section Division of Corporations

CT:	Name of Lim	ited Liability Company				
closed Articles of	Amendment and fee(s) are sub	mitted for filing.				
return all correspo	ondence concerning this matter	to the following:				
	Jeremy Thakurdin, Esq.					
		Name of Person				
	Attorney at Law					
Firm/Company						
	8219 Via Verona					
	Address					
	Orlando, FL 32836					
	City/State and Zip Code					
	jeremy.thakurdin@gmail.co					
	E-mail address: (to be used for future annual report notif	ication)			
ther information o	oncerning this matter, please e	all:				
Thakurdin, Esq.		407 285-4657				
Nатке о	f Person	Area Code Daytime	: Telephone Number			
d is a check for ti	he following amount:					
.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

TO ARTICLES OF ORGANIZATION OF

CHICKPEAS USA LLC		
(<u>Name of the Limited I</u> (A l	Liability Company as it now appears on our r Florida Limited Liability Company)	ecords.)
ticles of Organization for this Limited Liabi	ility Company were filed on 4/5/19	and assigned
document number L19000094995		
nendment is submitted to amend the following	ing:	
mending name, <u>enter the new name of th</u>	e limited liability company here:	
name must be distinguishable and contain the words	s "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
new principal offices address, if applicabl	e:	
pal office address MUST BE A STREET A	ADDRESS)	
		<u> </u>
new mailing address, if applicable:		
ig address MAY BE A POST OFFICE BO	OX)	
		
mending the registered agent and/or regi and/or the new registered office address h	stered office address on our records. §	enter the name of the new regist
mending the registered agent and/or registered office address had/or the new registered office address hame of New Registered Agent:	stered office address on our records. §	enter the name of the new regist
mending the registered agent and/or regi and/or the new registered office address h	stered office address on our records. §	
mending the registered agent and/or registered office address had/or the new registered office address hame of New Registered Agent:	stered office address on our records. gare: Enter Florida street	address
mending the registered agent and/or registered office address h Name of New Registered Agent:	stered office address on our records. gare: Enter Florida street	
mending the registered agent and/or registered office address h Name of New Registered Agent:	stered office address on our records. enere: Enter Florida street of City	address

If Changing Registered Agent, Signature of New Registered Agent

 Manager l = Authorized Member Name | <u>Address</u> **Type of Action** MILED NAHRI \square \square \land dd5508 Emerson Point Way, Orlando, FL 32819 **■**Remove __ □Change $\square Add$ □Remove ______ Change ______ □Remove ____ □Change _____ □Add _____ Change ______ 🗀 Add ______ CIRemove _____ Change

_____ 🖂 🗀 🖂 🖂 🗀 Add

______ □Remove

oved from our records: •

·-·	<u> </u>		
<u></u>			
			, <u></u>
			
			_
		*****	***
<u> </u>			
•			
			
		· · · · · · · · · · · · · · · · · · ·	
e date, if other than the cause date is listed, the date must fithe date inserted in this blooms's effective date on the Dep	ne specific and cannot be prior to date it does not meet the applicable st	of filing or more than 90 days after filing atutory filing requirements, this dat	g.) Pursuant to 605,0207 (
<u>4.</u>	date, but not an effective time, at	12:01 a.m. on the earlier of: (b) T	he 90th day after the
ecember 13th	2019		
	7 1	1	-
<u></u>	ignature of a member or authorized r	epresentative of a member	-

Filing Fee: \$25.00

Typed or printed name of signee