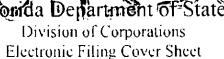
Division of Corporation



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: LEGALZOOM.COM INC. Account Name

Account Number : I20010000062 : (323)962-8600 Phone

: (323)962-3889 Fax Number

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THE GREAT FOODINI'S MOBILE BISTRO LLC

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COVER LETTER

TO:	Registration Se Division of Cor			
CA:D II'	THE GREA	AT FOODINES MOBILE BIST	RO LLC	
SOBJEC	UI:	Name of Limi	ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please re	etura all correspo	ondence concerning this matter	to the following:	
		Cheyenne Moseley		
		Market Hall	Name of Person	
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		Glendale, CA 91203		
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		dyarinsky@yahoo.com		·
For furth	Name of Person Legalzoom.com, Inc. Firm/Company 101 N Brand Blvd 11th Fl Address Glendale, CA 91203 City/State and Zip Code			
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□ \$25.	.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
	Registr Divisio P.O. B	ration Section on of Corporations ox 6327	Registration Section Division of Corportal Clifton Building 2661 Executive Co	on rations enter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability)	Company as it now appears on our records anited Easthly Company)	<u>i.</u>)
		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1021 23rd St. SW	
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited. The new name must be distinguishable and contain the words "Limited Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRES) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or register registered agent and/or the new registered office address Name of New Registered Agent: New Registered Office Address:	Naples, Florida 34117	2021 SE
Entenness mailing address if applicables	1021 23rd St. SW	
*	Naples, Florida 34117	
maining dualess MAT III. A TOST OF FICE DOAY		
Name of New Registered Agent:		s, enter the name of the new
New Negisterga Office Address.	EnterFloridastreet address	τ
		orida
	City	ZipCode
New Registered Agent's Signature, if changing Registered at I hereby accept the appointment as registered agent at provisions of all statutes relative to the proper and con accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	nd agree to act in this capacity. I fin aplete performance of my dutics, an ant as provided for in Chapter 605, i	nd I am familiar with and F.S. Or, if this document is
	If Changing Registered Agent, Signature	of New Registered Agent

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			□ Remove
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fective date, if other than the d in effective date is listed, the date must b ite: If the date inserted in this bloc cument's effective date on the Dep	k does not meet the applicab	late of filing or more than 9 te statutory filing require	(optional) 0 days after filing.) Pursuant to ments, this date will not be	o 605.0207 c listed as
record specifies a delayed The 90th day after the reco	effective date, but not and is filed.	n effective time, a	t 12:01 a.m. on the e	earlier o
January 4	2019			
Juan 1	mon			
•	grature of a member or authoriz	red representative of a men	ther	_
David Yarinsky	•			

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