Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

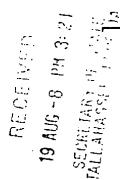
From:

Account Name : CONSTRUCTION & ENGINEERING SCHOOL

Account Number : I20170000070 : (305)226-8727 Phone : (305)226-8767 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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COVER LETTER

	gistration Se vision of Cor			
		TES FOOD SERVICES, LLC		
SUBJECT	·	Name of Limi	ted Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please retur	n all correspo	ndence concerning this matter	to the following:	
		LUCIA ESTRELLA		
			Name of Person	<u> </u>
		CONSTRUCTION & ENC	SINEERING SCHOOL	
			Firm/Company	
		8300 WEST FLAGLER S	Γ	20
			Address	
		MIAMI, FL 33144		ت ن ن
			City/State and Zip Code	
		LUCIAESTRELLA@BELI		· · · · · · · · · · · · · · · · · · ·
			to be used for future annual report no	incation)
For further	information c	concerning this matter, please or	all:	Ç
LUCIA ES	STRELLA	•	305 226-8727	
	Name o	C Person	Area Code Daytin	nc Telephone Number
Enclosed is	s a check for t	he following amount:		
	Filing Fee		□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy
				(additional copy is enclosed)
		ING ADDRESS:		LIER ADDRESS:
Registration Section Division of Corporations			Registration Sect Division of Corp	
	P.O. B	lox 6327 assee, FL 32314	Clifton Building 2661 Executive C	Center Circle

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PHAT PLATES FOOD SERVICES, LLC				
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on o d Liability Company)	ur records.)		
The Articles of Organization for this Limited Liability Compare Florida document number L19000116329	ny were filed on 04/29/20	oli and assigned and assigned.		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lis	ability company here:			
The new name must be distinguishable and contain the words 'Limited Lie	bility Company," the designs	tion "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:		2019		
(Principal office address MUST BE A STREET ADDRESS)				
	<u> </u>	00 7		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h	office address on our ere:	records, enter the name of the ner		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida sti	Enter Florida street address		
	City	, Florida Zip Code		
New Registered Agent's Stenature, if changing Registered Age	,	·		
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	gree to act in this capa ete performance of my a as provided for in Chap	tuties, and I am Jamiliar with and ter 605, F.S. Or, if this document is		
<u>11 C</u>	hanging 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
AMBR '	ROBINSON, ROCHELLE D	2111 LINHART AVE	
	·	FORT MYERS, FL 33901	Remove
			Change
AMBR	EUSEBIO, CARLOS FORIANO	2111 LINHART AVE	Add
		FORT MYERS, FL 33901	•
	·		Remove 2019 Change
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	08/08/2019			
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ne 90th day after the record is file	ed. A			
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