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# **COVER LETTER**

TO: Registration Sec Division of Corp			
subject:Im	perial Cacao L Name of Limi	ited Liability Company	<del></del>
The enclosed Articles of A	amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Jeff	rey A. Stein	<u></u>
		Firm/Company	
	1409 NW 48	8 th 5t_ Address	
,	Boca Rator	FL, 33431 City/State and Zip Code	<del></del>
	Jeffrey Stein E-mail address: (1	nFL @ aol - com to be used for future annual report notific	cation)
For further information co	ncerning this matter, please ca		
Jeffrey A S	Ferson	at ( <u>\$61)                                  </u>	Telephone Number
Enclosed is a check for the	e 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Imperial Cargo	han as it now appears on our records	·
(A Florida Limite	npany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compa	any were filed on $\frac{7/24/2019}{}$	and assigned
Florida document number <u>L 19000190394</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
The new name must be distinguishable and contain the words "Limited Li	iability Company," the designation "L1.C" or	
Enter new principal offices address, if applicable:		- S 5
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	聖書 五
		- <u>55 - F</u>
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		nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florid	a
	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		

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Jeffrey A-Stein	1409 NW 48+h st.	<b>©</b> Add
		1409 NW 48th st. Boca Raton FL, 33431	□ Remove
		561 866 0577	Change
			Add
			□ Remove
			Change
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an effec lote: 1	te date, if other than the date of filing:
reco The S	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.
ated _	8/9/19 lm 911 2019 2019
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00