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## **COVER LETTER**

Hight Tide			
.C.1;		aited Liability Company	
closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
return all correspo	ondence concerning this matter	to the following:	
	Wesley T. Mathieu, Esq.		
		Name of Person	
	sklawyers, pllc		
	-	Firm/Company	<del></del>
3208 Chiquita Blvd. Suite 208			
	-	Address	
Cape Coral, Florida 33914			
		City/State and Zip Code	
	wmathieu@sklawyers.net		
			cation)
her information c	oncerning this matter, please ca	all:	
T. Mathieu. Esq		239 772-1993	
Name o	f Person	Area Code Daytime	Telephone Number
d is a check for th	ne following amount:		
.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Fiting Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Division of Cor  Hight Tide  Core  Closed Articles of return all correspondence of the c	Plosed Articles of Amendment and fee(s) are subseturn all correspondence concerning this matter.  Wesley T. Mathieu, Esq.  sklawyers, plle  2208 Chiquita Blvd. Suite  Cape Coral, Florida 33914  wmathieu@sklawyers.net E-mail address: ( her information concerning this matter, please cort. Mathieu. Esq.  Name of Person  d is a check for the following amount:  .00 Filing Fee	Division of Corporations    Hight Tide Eats, LLC

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 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

2015 / 29 / 11:27

Hight Tide Eats, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company  High Tide Eats, LLC  The new name must be distinguishable and contain the words "Limited Liability Company," the  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address or registered agent and/or the new registered office address here:	nere: designation "LLC" or th	
(Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address of registered agent and/or the new registered office address here:	designation "LLC" or the	
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registered agent and/or the new registered office address here:		
	n our records, <u>en</u>	ter the name of the
Nigerous CNI control of A		
Minimum of Minimum 13 college of district and district an		
Name of New Registered Agent:		
New Registered Office Address:		
Enter Fi	wide season address.	
	orida street address	1 Zip Code
City New Registered Agent's Signature, if changing Registered Agent:	, Florida	Zip Code

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 ad or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
		-	Add
			☐ Remove
			Change
		Add	
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			Remove
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	ag any other unormation, enter change(s) here. (small analymu sneets, if necessary,)
<u> </u>	<del></del>
(If an effective <u>Note:</u> If the	late, if other than the date of filing:
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of hay after the record is filed.
Dated/	Signature of a member
-	Wesley T. Mathieu. Esq.  Typed or printed name of significant.

Page 3 of 3

Filing Fee: \$25.00