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## **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT:	Unlimited Food Suppliers, LLC					
SUBJECT		Name of Lim	ited Liability Company			
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		Alan E. Tonks				
			Name of Person			
Unlimited Food Suppliers, LLC						
		<del></del>	Firm/Company			
500 So. Australian Ave., Ste. 500						
Address						
West Palm Beach, FL 33401						
			City/State and Zip Code			
		usfllc@outlook.com				
		E-mail address: (	to be used for future annual report not	ification)		
For further is	nformation c	oncerning this matter, please ca	all:			
Alan E. Ton	iks		561 801-1002 at ()			
Name of Person			Area Code Daytin	ne Telephone Number		
Enclosed is a	a check for th	ne following amount:				
\$25.00 1	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)		
Re	iling Addres	Section	Street Address: Registration Se			
	vision of C D. Box 632	orporations 7	Division of Co The Centre of			
	Hahassee, I		2415 N. Monroe Street. Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

and assigned o UNLIMITED FOOD SUPPLIERS, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on January 3, 2020 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.I.C" or the abbreviation "L.I.C." Unlimited Food Suppliers, LLC Enter new principal offices address, if applicable: 1314 6th Street (Principal office address MUST BE A STREET ADDRESS) West Palm Beach, FL 33401 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 on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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

\_, Florida \_

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	Walter E. Pearcey	1314 6th Street	<b>=</b> Add
		West Palm Beach, FL 33401	□Remove
			🗆 Add
			Remove
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		<del></del>	□Add
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			☐ Change
			DAdd
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Filing Fee: \$25.00