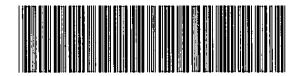
## LZ0000087672

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## **COVER LETTER**

TO: Registration Se Division of Cor			
United Fo	od Products LLC		
SUBJECT:	Mama of Lim	ited Liability Company	
	Name of Lim	ned Dabinty Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jeff Kaufman		
		Name of Person	· · · · · · · · · · · · · · · · · · ·
	United Food Prodeuts		
		Firm/Company	
	11555 Heron Bay Blvd. S	uite 200	
		Address	
	Parkland, Fl 33076		
	jeff@unitedfoxdproducts.c	City/State and Zip Code	
	E-mail address: (	to be used for future annual report not	ification)
For further information of	concerning this matter, please c	all:	
Jeffrey Kaufman		954 281-8281	
		at ()	
Name (	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he 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 Addre		Street Address:	
Registration		Registration Se Division of Co	
Division of C P.O. Box 633		The Centre of 3	-

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

United Food Products LLC		
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on ou d Liability Company)	r records.)
The Articles of Organization for this Limited Liability Compared Florida document number <u>L2000087672</u> .	ny were filed on 03/23/	/2020 and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lis	ability company here:	
n/a		
he new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	n/a	
Principal office address MUST BE A STREET ADDRESS)		<u></u>
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)	n/a	JUN -5 PM 3: 0
3. If amending the registered agent and/or registered offic	e address on our records	, iii =
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stre	
	Enter r torida sire	et adaress
		EL 11
	City	, FloridaZip Code

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 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
MGR	Simart Trading LLC	12555 Orange Dr. Davie Fl 33330	
	<u> </u>		□Remove
			□Change
			□Add
			Remove
			□ Change
			□ Add
			SS 2023 Remove  100 JUN T
			SOF P M
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

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	777 <b>5</b> 7
02/22/2020	
03/23/2020 tive date, if other than the date of filing:	(optional)
tive date, if other than the date of filing:  Tective date is listed, the date must be specific and cannot be prior to date of filin  If the date inserted in this block does not meet the applicable statutor	ng or more than 90 days after filing.) Pursuant to 605.0.
nent's effective date on the Department of State's records.	y thing requirements, this date will not be fisted
rd specifies a delayed effective date, but not an effective time, at 12:01	a.m. on the earlier of: (b) The 90th day after t
iled.	
June 1st, 2020	
·	