

12/18/2020

LA 0000149875

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : BARINAS & ASSOCIATES INC.
Account Number : 120000000082
Phone : (305)871-0889
Fax Number : (305)870-9623

2020 DEC 18 PM 4:45

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
DELICIA KOSHER, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
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RECEIVED

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YS
12/21/20

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DELICIA KOSHER LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARK HAYES
Name of Person

DELICIA KOSHER LLC
Firm/Company

330 NE 59TH STREET
Address

MIAMI, FL 33137
City/State and Zip Code

ACCOUNTING@GOURMETKOSHER.US
E-mail address: (to be used for future annual report notification)

2020 DEC 18 PM 1:15

For further information concerning this matter, please call:

MARK HAYES
Name of Person

786 357-2957
Area Code Daytime Telephone Number

Enclosed is a check for the 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 Address:
 Registration Section
 Division of Corporations
 The Centre of Tallahassee
 2415 N. Monroe Street, Suite 810
 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DELICIA KOSHER 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 JUNE 02, 2020 and assigned
Florida document number L20000149875

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 "LLC" or the abbreviation "L.L.C."

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 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

_____, Florida _____

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

Title	Name	Address	Type of Action
MGR	HERMANN KANTER	674 NE 191ST TERRACE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33179	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

INTEREST HOLDERS AS FOLLOWS:

1- 4 HAYES GROUP LLC MEMBERSHIP INTEREST 40%

2- DELICIA EMPANADAS KOSHER LLC MEMBERSHIP INTEREST 40%

3- GOURMET KOSHER LLC MEMBERSHIP INTEREST 20%

THIS LISTS THE OWNERSHIP OF THE COMPANY UNDER THE OFFICIAL OPERATING AGREEMENT OF THE COMPANY SIGNED BY THE PARTIES

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated DECEMBER 3, 2020

Signature of a member or authorized representative of a member

MARK HAYES

Typed or printed name of signer

Filing Fee: \$25.00