

L20000 1607140

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(Address)

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(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FL

2020 AUG 19 AM 10:28

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AUG 20 2020

# COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** ORGANIC FOOD KINGS 2 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:

SURELY MOLINA

\_\_\_\_\_  
Name of Person

GLOBAL ACCOUNTING 7 TAX PROFESSIONAL CORP

\_\_\_\_\_  
Firm/Company

7500 NW 25 ST SUITE 246

\_\_\_\_\_  
Address

MIAMI, FL 33122

\_\_\_\_\_  
City/State and Zip Code

SMOLINA@USA-CONTABILIDAD.ORG

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SURELY

305 6405951  
at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

ORGANIC FOOD KINGS 2 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 06/16/2020 and assigned  
Florida document number L20000167140.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

N/A

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)**

3246 NORTH MIAMI AVE

UNIT 115

MIAMI FL 33127

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

3246 NORTH MIAMI AVE

UNIT 115

MIAMI, FL 33127

**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:**

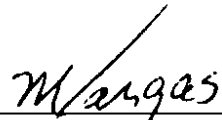
Name of New Registered Agent: MAURICIO VARGAS

New Registered Office Address: 3246 NOTH MIAMI AVE UNIT 115  
*Enter Florida street address*

MIAMI, Florida 33127  
*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>	<u>Address</u>	<u>Type of Action</u>
MGR	MAURICIO MONTONEZ	3246 #115 N MIAMI AVE	<input type="checkbox"/> Add
		MIAMI, FL 33127	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ALEXANDER MONTONEZ	3246 NORTH MIAMI AVE	<input checked="" type="checkbox"/> Add
		UNIT 115	<input type="checkbox"/> Remove
		MIAMI, FL 33127	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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2020 AUG 19 AM 10:28  
CLERK OF DISTRICT COURT  
MIAMI, FL

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2020 AUG 19 AM 10:28  
CLERK OF DISTRICT COURT  
STATE OF MISSISSIPPI

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2020 AUG 19 AM 10:28  
CLERK OF DISTRICT COURT  
JANUARY 19, 1981

(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)

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 AUGUST 8, 2020

*Margas*  
Signature of \_\_\_\_\_

Signature of a member or authorized representative of a member

MAURICIO VARGAS

Typed or printed name of signee