# L21000/95220

(Re	equestor's Name)	
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### **COVER LETTER**

SUBJECT: 6EL	ATO GO	SALLC			
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please return all correspond	dence concerning this matter	to the following:			
	DOMERICO	DIADDIO			
		Name of Person			
	GELATO	- GO			
		Pirm/Company	<del></del>		
	1600 PE		3620		
		Address			
	MIAMI	, tl, 33132	·		
	DOMENICO 6	FL 33132 City/State and Zip Code GELATOGO YET			
		to be used for future annual report notificat			
For further information concerning this matter, please call:					
DOMENICO )	DADDIO	at (56) 427	3,66		
Name of P	rerson	Area Code Daytime Te	elephone 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:		Street Address:			

TO:

**Registration Section Division of Corporations** 

Mailing Address:
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

GELATO GO SA. 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 04 27/2021 and assigned Florida document number 21 000 195 220								
This amendment is submitted to amend the foll	owing:							
A. If amending name, enter the new name o	f the limited liabi	lity company here:						
The new name must be distinguishable and contain the v	vords "Limited Liabili	ty Company," the designation "	LLC" or the ab	breviation "L.L.C."				
Enter new principal offices address, if applic	able:			<del></del>				
(Principal office address MUST BE A STREET ADDRESS)								
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		1600 PE 15 AVE PUE 3 APT # 3620 22 MILMI, FL, 33132 22 W						
B. If amending the registered agent and/or agent and/or the new registered office addre		ddress on our records, <u>er</u>	iter the nam	e of the dew registered				
Name of New Registered Agent:	1600 NE	157 AUDINIE	APT	# 3620				
New Registered Office Address:	100 PC	Enter Florida street ad	Idress	11.3020				
	MIA	MI	. Florida	33132				
		City		Zip Code				
New Registered Agent's Signature, if changing	Registered Agent:							
I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as regi being filed to merely reflect a change in the company has been notified in writing of this	er and complete p istered agent as p registered office o	performance of my duties rovided for in Chapter 60	s, and 1 am f 05, F.S. Or,	amiliar with and if this document is				

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 M no 6	Type of Action
MBR	PURIT	PANICHAKUL	106/347 MOD 6 BANGKOK, THAILAND	Andd
				□Remove
				□Change
				□Add
				□Remove
				Change
				्ट्र □∧dd
				Remove
				Change SDChange SO O
				□∧dd
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				Change
				🗆 Add
				□Remove
				□Change
		<del></del>		□Add
				□Remove
				□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 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. f 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 ecord is filed. Signature of a member or authorized representative of a member DONE MICO

Typed or printed name of signee