## L21000205952

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## **COVER LETTER**

TO: Registration Division of	n Section Corporations	
	S CUISINE LLC	
SUBJECT:	Name of Lin	nited Liability Company
The enclosed Articles	s of Amendment and fee(s) are sub	omitted for filing
	espondence concerning this matter	
	EDOUARD MELLUL	
	<del></del>	Name of Person
	EMPIRE CAPITAL HOL	DING LLC
		Firm/Company
	19589 NE 10th Ave	
		Address
	Miami, FL 33179	
	admin@accesscuisine.com	City/State and Zip Code
	<del>-</del>	to be used for future annual report notification)
For further information	on concerning this matter, please c	all:
EDOUARD MELLU	L	786 813-2976
Nan	ne of Person	Area Code Daytime Telephone Number
Enclosed is a check for	or the following amount:	
■ \$25.00 Filing Fee	E □ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)  □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
P.O. Box 6	on Section f Corporations	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

ACCESS CUISINE 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  $\frac{05/03/2021}{1}$ and assigned Florida document number \_\_\_\_\_\_L21000205952 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) 16850 COLLINS AVE #112 131 Enter new mailing address, if applicable: SUNNY ISLES BEACH, FL 33160 (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 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	EMPIRE CAPITAL HOLDING LI	19589 NE 10TH AVE MIAMI, FL 33179	□Add
		<del></del>	□Remove
			🗏 Change
AMBR	EDOUARD MELLUL	16850 COLLINS AVENUESTE 112131	□Add
		SUNNY ISLES BEACH, FL 33160	■Remove
			□Change
AMBR	YANIV MELLUL	16850 COLLINS AVE #11213	□Add
		SUNNY ISLES BEACH, FL 33160	Remove
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Filing Fee: \$25.00