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To:

Division of Corporations

Fax Number : (850)617-6383

From:

2

Account Name : ASLAN TAX SERVICES INC

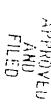
Account Number : I20140000082 Phone : (305)644-9144 Fax Number : (786)477-5802

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

Email Address: darwin@aslantaxservice.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MAFLO FOODS LLC

Certificate of Status	0
Certified Copy	Ü
Page Count	05
Estimated Charge	\$25.00



Registration Section

TO:

COVER LETTER

Division of Cor	porations		
	DODS LLC		
SUBJECT:	Name of Limi	ted Liability 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:	
	DARWIN SANCHEZ	·	
		Name of Person	
	ASLAN TAX SERVICES	INC.	
		Firm/Company	
	1770 W FLAGLER ST ST	E 4	
		Address	
	MIAMI, FL 33135		
		City/State and Zip Code	
	DARWIN@ASLANTAXS	ERVICE.COM	
	E-mail address: (to be used for future annual report noti	fication)
For further information	concerning this matter, please c	all:	
DARWIN SANCHEZ		305 644 - 9144 at ()	
Name	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	the following amount:		
■ \$25.00 Piling Fcc	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certified Copy (additional copy is enclosed)
Malling Addre Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FI	porations 'allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAFLO FOODS LLC		
(Name of the Limited Linbility (A Florida	ty Company as it now appears on our reco a Limited Liability Company)	(प्राः)
The Articles of Organization for this Limited Liability C	Company were filed on 05/18/2021	and assigned
Florida document number L21000228163	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "Li	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	(ESS)	
n		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered	d office address on our records, ent	er the name of the new register
agent and/or the new registered office address here:		202
		22 H
Name of New Registered Agent:		
New Registered Office Address:		- <u> </u>
-	Enter Florida street add	Florida Co.
	City	Zip-Code
		. 7

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
AMBR	Rodrigo Alberto Godoy	1770 W Flagler St Ste 5	≅Add
-		Miami, FL 33135	□ Remove
			Change
			□Add
			\ _Remove
			□Add
			Change
			□Add
			□Remove
			□Add
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			Change

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Note: If	e date, if other than the date of f tive date is listed, the date must be specific the date inserted in this block does rates effective date on the Department	not meet the app	licable statutory fil.	more than 90 days after fing requirements, this	nal) ling.) Pursuant to 605.0207 date will not be listed as
e record s rd is filed	specifies a delayed effective date, but d.	not an effective	e time, at 12:01 a.m	on the earlier of (b)	The 90th day after the
Ostad		_	 ·		
		. ì			
Dated	× ilao	ia Z			
- MICO _	× Signature	of a recimber or au	thorized representative	e of a member	