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## **COVER LETTER**

TO: Registration Section

Division of Cor	porations			
TENTACIO	ONES GOURMENT USA LLO	-		
SUBJECT:	Name of Lin	ited 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:		
	CARLA MELLY			
		Name of Person		
	TENTACIONES GOURM	IENT USA LLC		
		Firm/Company		
	15090 SW 104 ST 208			
		Address		
	MIAMI FLORIDA 33196			
		City/State and Zip Code		
	carlamelly@hotmail.com		·	
	E-mail address: (	to be used for future annual report not	(fication)	
For further information c	oncerning this matter, please c	ali:		
CARLA MELLY		786 3898133 at ()		
Name o	r Person	at ()Area Code Daytin	ne Telephone Number	
	(21)			
Enclosed is a check for the		_		
■ \$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 Addres	<del></del>	Street Address:		
Registration Section		_	Registration Section	
Division of Corporations		Division of Corporations The Centre of Tallahassee		
P.O. Box 632				
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TENTACIONES GOURMENT USA LLC		
( <u>Name of the Limited Liability Company</u> (A Florida Limited Lia	as it now appears on our re hilny Company)	ecords.)
The Articles of Organization for this Limited Liability Company w	ere filed on 05/28/2021	and assigned
Florida document number L21000250396		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
TENTACIONES GOURMET USA LLC		
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)	<del></del>	
		0
Enter new mailing address, if applicable:		· 6
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>	
Braning dadress State Dig at 1951 Of FICE DOLG		
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	dress on our records, <u>e</u>	nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street a	uldress
·	City	_, Florida Zin Code
New Registered Agent's Signature, if changing Registered Agent:	- 17	,
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of my dutic ovided for in Chapter (	es, and I am familiar with and 505, F.S. Or, if this document is

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

ANIDK - A	authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Remove
			□Remove
		□Change	
			□Add
			□Remove
			(I)Change
		□Add	
		□Remove	
		□Change	
		□Add	
	A-100-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	□Remove	
		□Change	
			□Add
		□Remove	
			□Change

. If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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<u>Note:</u> 1	e date, if other than the date of filing:  (optional)  tive 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)  The date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as that's effective date on the Department of State's records.
he record ord is file	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 f.
Dated _	07/13/2021
	Signature of a member or authorized representative of a member
	Carlo Mellin
	Typed or printed name of signee

Filing Fee: \$25.00