

L21000264042

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

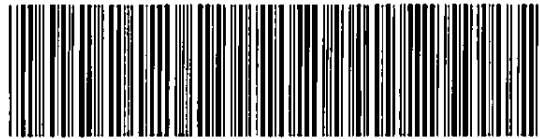
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

R. HUNT
05/21/24

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____

Rudz
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:

Federick Clarke
Name of Person

Rudz Catering LLC
Firm/Company

6661 Charleston St
Address

Hollywood FL 33024
City/State and Zip Code

Graceing & live. com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Federick Clarke at (794) 244 5784
Name of Person Area Code Daytime Telephone 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:

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**

RudZ 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 6/7/2021 and assigned Florida document number L21000264042

This amendment is submitted to amend the following:

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

RudZ Catering 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)

NA

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

NA

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:

Roderick Clarke

New Registered Office Address:

6661 Charleston St

Enter Florida street address

Adelphiwood

City

Florida

Zip Code

FL 33024

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.

RC

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>
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_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Change
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MGR	Roderick Clarke	6661 Charleston Ct Hollywood FL 33024	<input type="checkbox"/> Add
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_____	_____	954-394 1471	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Change
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AMBR	Ingrid Clarke	6661 Charleston St. Hollywood FL 33024	<input type="checkbox"/> Add
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_____	_____	754-244 5784	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Change
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_____	_____	_____	<input type="checkbox"/> Add
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[illegible]

(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.

5/17/24

[Handwritten signature]

Roderick Clarke

Typed or printed name of signee

Filing Fee: \$25.00