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COVER LETTER

TO: Registration So Division of Co				
Gourmet (Diffusion, LLC.			
SUBJECT:	Name of Lin	nited Liability Company	 -	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	Jose Viton-Garcia			
		Name of Person		
		Firm/Company	·	
	10451 sw 56th terrace			
		Address		
	Miami,FL 33173			
		City/State and Zip Code		
	jose@gourmetdiffusion.c	om (to be used for future annual report no	A16	
For further information of	concerning this matter, please c	·	ancation	
Jose Viton-Garcia		786 879-488 3		
Name c	of Person	Area Code Daytii	me Telephone Number	
Enclosed is a check for t	he 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:	_	
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 632	27	The Centre of	•	
Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gourmet Diffusion, LLC.		
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liability	y Company were filed on 07/07/2021	and assigned
lorida document number L21000310300	·	_
This amendment is submitted to amend the following	Ç.	
A. If amending name, <u>enter the new name of the l</u>	imited liability company here:	
The new name must be distinguishable and contain the words "I	Limited Liability Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AD	DRESS)	
	 -	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
 If amending the registered agent and/or registe gent and/or the new registered office address here 	ered office address on our records, <u>enter the nar</u> <u>e</u> :	ne of the new register
Name of New Registered Agent:	<u> </u>	٠, -,
New Registered Office Address:		
	Enter Florida street address	B 0
_	Florida	့
	City	Zip Code

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>	<u>Address</u>	Type of Action
MGR	Jose Viton	10451 sw 56th Terrace Miami,FL 33173	
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			☐ Change ☐ Add \ ☐ Remove ☐ Change
			رې —— □Change
			□Add
			□Remove

Changing the title of I	President to MN	GR				
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ctive date, if other tha	n the date of fili	ing: 07/12/202		(op	ptional)	
ffective date is listed, the da If the date inserted in t	his block does no	t meet the applic	cable statutory fi	more than 90 days a ling requirements,	this date will not	t to 605.0. be listed
ment's effective date on	the Department o	f State's records	,			
ord specifies a delayed ef	fective date, but n	iat an affactiva t	ima at 12:/)1 a s	s an the vertice of	ZEV TELLOOM J.	6
filed.	recove date, out n	iot an enceuve i	me, at 12,01 a.i	i. on the carner of,	(0) The sounds	ry aner n
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July 12th		_:	-//		2021 JUL 1	
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