

L21000362241

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

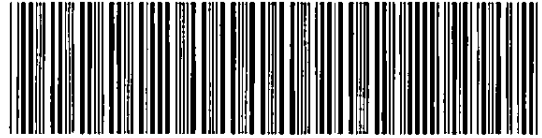
(Business Entity Name)

(Document Number)

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R. HUNT  
09/17/24

Member Resignation Letter  
Florida Department Of State, Division of Corporations

September 3, 2024

Genesis Food LLC  
1748 Delafield Dr  
Winter Garden, Florida 34787.

Dear Members of Genesis Food LLC,

I, José Montenegro, hereby submit my resignation as an active member of the Board of Members and from any operational duties within Genesis Food LLC, effective immediately as of September 3, 2024.

As per the terms agreed upon during our annual meeting and in accordance with the Operating Agreement, I will be retiring from my role. I have appreciated the opportunity to contribute to the growth and success of Genesis Food LLC, and I wish the company continued success in its future endeavors.

Please feel free to reach out to me should any further clarification or documentation be required to facilitate this transition.

Sincerely,  
José Montenegro

A handwritten signature in black ink, appearing to be 'Jf' or 'J Montenegro', written in a cursive style.

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: GENESIS FOOD

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:

Samantha Montilva

Name of Person

Genesis Food LLC

Firm/Company

1748 Delafield Dr

Address

Winter Garden Florida 34787

City/State and Zip Code

piposlatinfood@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Samantha Montilva

407

8816497

at ( )

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

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>
MGR	Jose Montenegro	13618 Tortona Ln #4202 Windermere FL 34786	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Jose Enrique Useche	1748 Delafield Dr Winter Garden FL 34787	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Samantha Montilva	1748 Delafield Dr Winter Garden FL 34787	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

DAY 3 OF SEPTEMBER 2024

Dated \_\_\_\_\_

Jose Montenegro

Typed or printed name of signee