

122 0000 44424

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

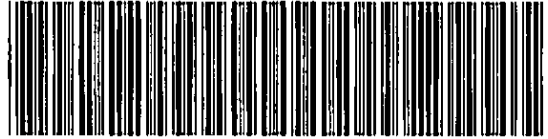
(Business Entity Name)

(Document Number)

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2022 JUN -7 PM 3:04  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MORRIS NATURAL FOOD LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

PAOLA JAZMIN ROLDAN RODRIGUEZ  
Name of Person

MORRIS NATURAL FOOD LLC  
Firm/Company

19725 NW 52ND PL  
Address

MIAMI GARDENS, FL 33055  
City/State and Zip Code

Morrisnaturalfood@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PAOLA JAZMIN ROLDAN RODRIGUEZ                      786                      782-1389  
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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

2022 JUN -7 PM 3:04

MORRIS NATURAL FOOD LLC

(Name of the Limited Liability Company as it now appears on our records)  
(A Florida Limited Liability Company)

SECRETARY OF STATE  
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 01/18/2022 and assigned Florida document number 122000044424.

This amendment is submitted to amend the following:

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

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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: PAOLA JAZMIN ROLDAN RODRIGUEZ

New Registered Office Address: 19725 NW 52ND PL

*Enter Florida street address*

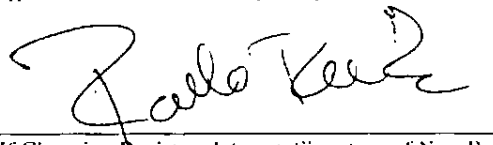
MIAMI GARDENS, Florida 33055

*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 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	PAOLA J ROLDAN RODRIGUEZ	19725 NW 52ND PL.	<input type="checkbox"/> Add
		MIAMI GARDENS, FL 33055	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	PAOLA J ROLDAN RODRIGUEZ	19725 NW 52ND PL.	<input checked="" type="checkbox"/> Add
		MIAMI GARDENS, FL 33055	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Multiple horizontal lines for amending information.

2022 JUN -7 PM 3:04  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED


E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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)

**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.

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.

Dated JUNE 1ST 2022

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

PAOLA J ROLDAN RODRIGUEZ

\_\_\_\_\_  
Typed or printed name of signee