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SECRETARY OF STATE
DEPARTMENT OF CORPORATION
2022 OCT 11 AM 9:27

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GET THE COOK LLC

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:

Mark Schweikert

Name of Person

Schweikert Law PLLC

Firm/Company

1111 Brickell Avenue, Suite 1550

Address

Miami, FL 33131

City/State and Zip Code

lmata@meatnbone.com

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

For further information concerning this matter, please call:

Mark Schweikert

305 926-9452
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

GET THE COOK 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 March 10, 2022 and assigned
Florida document number 1.22000121498.

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:

2229 SW 22 ST

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33145

Enter new mailing address, if applicable:

2229 SW 22 ST

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI, FL 33145

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:

CLEVER CLEAVER INVESTMENTS LLC

New Registered Office Address:

2229 SW 22 ST

Enter Florida street address

MIAMI

City

Florida 33145

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	CLEVER CLEAVER INVESTMENTS LLC	2229 SW 22 ST	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33145	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MATA, LUIS E	2229 CORAL WAY	<input type="checkbox"/> Add
		CORAL GABLES, FL 33145	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	VOLLBRACHT, GERMAN	2229 CORAL WAY	<input type="checkbox"/> Add
		CORAL GABLES, FL 33145	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	LLAURADO, GABRIEL	2229 CORAL WAY	<input type="checkbox"/> Add
		CORAL GABLES, FL 33145	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

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.

Dated October 5, 2022

6/1/11

GABRIEL LLAURADO

Using Case: \$25.00