

L22 000 147 388

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

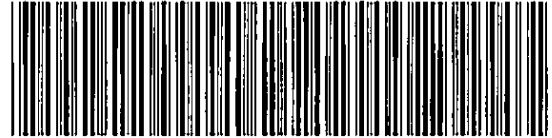
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JUN 1 / 2022

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06/16/22 --R1801--016 **90.00

FILED
2022 JUN 16 PM 12:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
2022 JUN 16 PM 1:26
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CUISINE CITY CAFE 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:

BRANDON BOLTON

Name of Person

CUISINE CITY CAFE LLC

Firm/Company

1016 MADISON ST

Address

PALATKA, FL 32177

City/State and Zip Code

CUISINECITYCAFE22@GMAIL.COM

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

For further information concerning this matter, please call:

BRANDON BOLTON

Name of Person

at (904)

Area Code

916-1642

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 16 PM 12:07
SECRETARY OF STATE
TALLAHASSEE, FL

CUISINE CITY CAFE 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 03/25/2022 and assigned
Florida document number L22000147388.

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 "L.I.C" 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:

EXECUTIVE DRIVE LLC

New Registered Office Address:

1860 SW FOUNTAINVIEW BLVD #100

Enter Florida street address

FT LAUDERDALE

Florida

33312

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>
AMBR	HERBERT BRADY	1016 MADISON ST	<input type="checkbox"/> Add
		PALATKA FL 32177	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	ANGEL MCCLOUD-BRADY	1016 MADISON ST	<input type="checkbox"/> Add
		PALATKA FL 32177	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	BRANDON BOLTON	1016 MADISON ST	<input checked="" type="checkbox"/> Add
		PALATKA FL 32177	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	JOYCELYN RHULE	1016 MADISON ST	<input checked="" type="checkbox"/> Add
		PALATKA FL 321773	<input 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

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper appears to be a standard notebook page or a sheet of stationery. There is no handwriting or other markings on the page.

(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.

Dated JUNE 13, 2022

Signature of a member of the

Signature of a member or authorized representative of a member

Bradon Bolton

Typed or printed name of signee

Filing Fee: \$25.00