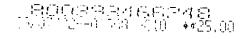
JOO HEE000 LA

	(Requestor's Name)
	(Address)
	(Hadress)
	(Address)
	(Crty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Decree of New Lea)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:

Office Use Only



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2022 SEP -7 AM 11: 19

2022 SEP -7 / // HTH: 45

C/ 9/7/2023

COVER LETTER

10:	Division of Corpo			
SUBJ	ECT:	Mihrar	n Vartanian Food	Trucks LLC
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Name of Limited	d Liability Company	
The er	nclosed Articles of Ar	nendment and fee(s) are submi	ited for filing.	
Please	return all correspond	lence concerning this matter to	the following:	
			invan Vartania	^
			E Santorini Firm/Company	
		1813 Sa	cint Johns Bluff	N_
		<u>Jack</u>	Ksonville FL 3	32225
		Mike-	City/State and Zip Code 777. Va gyvail. C be used for future annual report notificat	ion)
For fi	arther information cor	ncerning this matter, please cal	l:	
******	Name of	Vartanian Person	at (904) 600 - Area Code Daytime Te	- US 2 lephone Number
Enclo	osed is a check for the	following amount:		
⊡ ∕\$	525.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration S		Street Address: Registration Section	on .

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appea ability Company)	Food Trucking 2 FEC-2	\$M 11: 45
The Articles of Organization for this Limited Liability Company v Florida document number <u>L22000324</u> 00	were filed on	7/21/27 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil Cafe Santorivi The new name must be distinguishable and contain the words "Limited Liabili	1 LC		
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 a agent and/or the new registered office address here:	ddress on our	records, enter the name of the new reg	istered
Name of New Registered Agent:			
New Registered Office Address:	Enter Flo	lorida street address	
		, Florida Zip Code	
N. D. St. Land Brains Designated Aponts	City	Zīp Code	
New Registered Agent's Signature, if changing Registered Agent:	an oraș în aliă	t forther arms to arms by	ileb elia
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p	performance o	of my duties, and I am familiar with an	d

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>	Address	Type of Action
			□ Add
			□ Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			🗆 Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Remove
			Change
			□Add
			□Remove
			□Change

amending any	other information, enter c	change(s) here:	: (Attach addition	ai sneeis, ij necessa	iry.)
·-					
 				-	. <u></u>
				<u> </u>	-,
					
					
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			 -		
					
				<u>. </u>	
f an effective date Note: If the date	f other than the date of fil s listed, the date must be specific inserted in this block does no tive date on the Department o	and cannot be prior of meet the applic	r to date of filing or me cable statutory filing	(option ore than 90 days after fi grequirements, this c	ling.) Pursuant to 605.0207
record specifie d is filed.	a delayed effective date, but	not an effective t	ime, at 12:01 a.m. (on the earlier of: (b)	The 90th day after the
Dated	17/22				
	Signature u	of a member or ave	orized representative	of a member	
		Milara	n Varta		

Filing Fee: \$25.00