Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TAX CARE CELEBRATION

Account Number : I20190000007 Phone : (786)845-8854 Fax Number : (321)473-3052

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:__

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **QHALI FOODS LLC**

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COVER LETTER

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cupusca	QHALI FO	ODS LLC		
SUBJECT	r: <u> </u>	Name of Lim	ited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	ırn all correspo	ondence concerning this matter	to the following:	
		JESSICA TORRES		
		1	Name of Person	· · · · · · · · · · · · · · · · · · ·
		TAX CARE CELEBRATI	ION	
			Firm/Company	
		1400 NW 107TH AVE ST	E 203	
		<u></u>	Address	
		SWEETWATER FL 3317	2	
			City/State and Zip Code	<u> </u>
		JESSICA.TORRES@TAX		
F 6 - 4 -			to be used for future annual report no	tification)
ror turtnet	r information c	oncerning this matter, please c	an;	
JESSICA	TORRES		786 845-8854 at ()	
	Name o	f Person	Area Code Daytir	ne Telephone Number
Enclosed i	s a check for th	ne following amount:		
■ \$25.04	0 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>1ailing Addres</u> Legistration S		Street Address: Registration Se	ection
	Division of C	Corporations	Division of Co	rporations
	P.O. Box 632 Tallahassee, l		The Centre of 2415 N. Monre	Tallahassee be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OULL FOODS LLC

(Name of the Limited Liab (A Flori	ility Company ida Limited Lic	as it now appears of ability Company)	n our records.)	
The Articles of Organization for this Limited Liability lorida document number L22000338638	Company w	vere filed on 07/28	/2022	and assigned
his amendment is submitted to amend the following:				
a. If amending name, enter the new name of the lin	mited liabili	ty company here	:	
he new name must be distinguishable and contain the words "L	imited Liability	y Company," the desig	gnation "LLC" or the	abbreviation "L.L.C."
Inter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADI	<u>DRESS)</u>			
Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)				
3. If amending the registered agent and/or register		dress on our reco	ords, <u>enter the na</u>	me of the new reg
gent and/or the new registered office address here	•			
Name of New Registered Agent:			 	
New Registered Office Address:				022 (
		Enter Florida	street address)CI 3
		Ciry	, Florida _	Zip Code IT

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 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
MGRM	ANTONIO COOK HARDY	500 BRICKELL AVE	\(\beta\) Add
		APT 502 EAST TOWER	□Remove
		MIAMI, FL 33131	
			□Add
			□Remove
			□Change
			□Add
			□Remove
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ective date, if other than the d n effective date is listed, the date must b	se specific and cannot be prior	r to date of filing or more	than 90 days after filing.) Pursu	ant to 605.0207
te: If the date inserted in this bloc current's effective date on the Dep			equirements, this date will no	ot be fisted as
ecord specifies 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
is filed.		,		,
ted	2022	· ·		
	gnature of a member or with	uel Plaza	a member	
3	ignature by a method of som	orized representative of	a memoci	
JOSE MIGUEL J PLAZA	CAVERO			
···	Tuned or print	ed name of signee		

Filing Fee: \$25.00