122000 411 308

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







300425580383

03/11/24--01019--022 **30.00

210g 157 11 PM 3:46

COVER LETTER

TO:	Registration Sect Division of Corpo	ion grations		
		tronomic Investment Group		
SUBJE	ECT:			
The en	closed Articles of A	mendment and fee(s) are submi	tted for filing.	
		dence concerning this matter to		
		Mirko Cussianovich		
			Name of Person	
Peruvian Gastronomic Investment Group				
Firm/Company				
3085 SW 140 Ave				
			Address	
City/State and			City/State and Zip Code	
		ntification)		
			be used for future annual report no	
For f	urther information c	oncerning this matter, please ca		
Mirk	o Cussianovich		305 794-0545 at ()	
	Name o	f Person	Area Code Dayt	ime Telephone Number
Encl	osed is a check for t	he 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 Addre Registration Division of O P.O. Box 63	Section Corporations 27	The Centre of	: Section Corporations of Tallahassee nroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Peruvian Gastronomic Investment Group (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 09/20/2022 _____ and assigned Florida document number L22000411308 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: New Registered Office Address: Enter Florida street address

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.

City

_, Florida ____

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>	Name	Address	Type of Action
MGR	Walter E. Orejuela Pita	3085 SW 140 Ave	≣ Add
		Miramar Fl 33027	□Remove
			Change
AMBR	Luis Rafael La Torre Meneses	3085 SW 140 Ave	
		Miramar Fl 33027	□Remove
			Change
			□Remove
			Change
			□Add
	,		Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Change

-	
10 PM	ctive date, if other than the date of filing: 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 e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ument's effective date on the Department of State's records.
he re	cord 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 stilled.
Da	edSignature of a member or authorized representative on a member