

L22000414691

Division of Corporations

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)214-8442

****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
RHINE FOOD SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

DEC 22 2022
A. LUNT

****Resubmission After Rejection, Please Honor Original File Date of 12/20/2022****

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
CLERK OF COURT
2022 DEC 20 AM 11:27

RHINE FOOD SERVICES 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 09/23/2022 and assigned
Florida document number L22000414691.

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:

5717 Red Bug Lake Road, Ste 345

(Principal office address MUST BE A STREET ADDRESS)

Winter Springs, FL 32708

Enter new mailing address, if applicable:

5717 Red Bug Lake Road, Ste 345

(Mailing address MAY BE A POST OFFICE BOX)

Winter Springs, FL 32708

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

Florida

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	William A. Rhine	5717 Red Bug Lake Road, Ste 345	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		Winter Springs, FL 32708	<input checked="" type="checkbox"/> Change
AMBR	Justin Rhine	5717 Red Bug Lake Road, Ste 345	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
		Winter Springs, FL 32708	<input type="checkbox"/> Change
AMBR	Grace A. Cawley-Rhine	5717 Red Bug Lake Road, Ste 345	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
		Winter Springs, FL 32708	<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
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			<input type="checkbox"/> Change

