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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CDT FOOD SERVICES LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CDT FOOD SE	RVICES LLC			
(Name of the Limited Liability (A Florida	y Company as it now appears on Limited Liability Company)	our records.)		-
he Articles of Organization for this Limited Liability Co	ompany were filed on 10/07/	2022	and a	assigned
lorida document number 1.22000434453				-
his amendment is submitted to amend the following:				
. If amending name, enter the new name of the limit	ted liability company here:			
ne new name must be distinguishable and contain the words 'Limi	and Liability Company," the design	nation "LLC" or the	abbreviation	L.L.C."
nter new principal offices address, if applicable:		<del>-</del>		· · · · · · · · · · · · · · · · · · ·
Principal office address MUST BE A STREET ADDR	ESS)	-		
nter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BOX)				
. If amending the registered agent and/or registered	office address on our reco	rds, <u>enter the n</u> a	ime of the r	iew regist
gent and/or the new registered office address here:				
Name of New Registered Agen;				
New Registered Office Address:			<b>B</b> √ ` .	2:29
	Enser Florida s	uresi oddress	,	99 ∩
	City	, Florida _	Zip Cod	<del>7</del>
ew Registered Agent's Signature, if changing Registered	Agent;		Zip Cod	
hereby accept the appointment as registered agent a	and novee to act in this cape			

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>	Name	Address	Type of Action
MGR	MARIANA A SALHUANA	445 SW 133 CT	
	· · · · · · · · · · · · · · · · · · ·	MIAMI, FL. 3184	■ Remove
MGR	CARLOS A SALHUANA	650 NW 98TH CT	
		MIAMI, FL. 33172	■Remove
			Change
AMBR	DANIEL A SALHUANA	445 SW 133 CT	
		MIAML, FL. 33184	Remove
		<del> </del>	
			□Add
			⊒Кспюче
			□Change
<del></del>			CAdd
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			🗆 Remove
		****	Change

		ch additional sheets, if necessary.)
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ctive date, if other than the	tate of filing:	(optional)
effective date is fixed, the date must set if the date inserted in this blo terrent's effective date on the D.	ak does not racet the applicable statu	filing as more time 90 days after filing.) Pursuant to 605,0207 story 5 ling requirements, this date will not be listed as
ourd specifies a delayed efficance offied.	date, but not an effective time, at 12	:01 a.m. on the earner of: (b) The 90th day after the
ed	2922	
	Sa22	<b>.</b>
X	Signature of a transfer or authorized repr	escribinive of a memore
	LUIS A. SALHUANA	

Filing Fee: \$25.00

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