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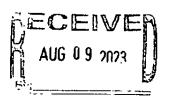
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SECRETARY CT AND



## COVER LETTER

| TO: Registration Se<br>Division of Cor |   |   |  |
|--|---|---|--|
|  | A FOODS. LLC                                      |   |  |
| SUBJECT:                               | Name of Lim                                       | ited Liability Company  |  |
| The enclosed Articles of               | Amendment and fee(s) are sub                      | mitted for filing.  |  |
| Please return all correspo             | ondence concerning this matter                    | to the following:   |  |
|  | SHARATH AMBADIPUT                                 | DI  |  |
|  |   | Name of Person  | <del>-</del>   |
|  | TIRUMALA FOODS, LLO                               | С   | S 202  |
|  |   | Firm/Company  | 3 OC 3 OC  |
|  | 3700 ULMERTON ROAD                                | D. SUITE 107  | NA 70 .  |
|  | <del> </del>                                      | Address   |  |
|  | CLEARWATER, FLORID                                | DA 33762  | 2023 OCT 10 PM 2: 20<br>SECRETARY CALLANE<br>TALLANAMEERS                                  |
|  |   | City/State and Zip Code   |  |
|  | sharath4ms@gmail.com                              |   |  |
| For further information o              | e-mail address: ( oncerning this matter, please c | to be used for future annual report noti-                           | fication)  |
|  |   |   |  |
| SHARATH AMBADIPUDI                     |   | 813 894-8383<br>at ()   |  |
| Name o                                 | f Person  | Area Code Daytim  | e Telephone Number   |
| Enclosed is a check for the            | ne following amount:                              |   |  |
| ■ \$25.00 Filing Fee                   | ☐ \$30.00 Filing Fee &<br>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 Addres Registration S          |   | Street Address:<br>Registration Sec                                 | ction  |
| Division of C                          | Corporations /                                    | Division of Cor   | porations  |
| P.O. Box 632<br>Tallahassee, 1         |   | The Centre of T   | Callahassee<br>e Street, Suite 810   |
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Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| 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 "LLC".  Enter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  Muilling 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 address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida  Florida  Florida   | TIRUMALA FOODS, LLC  |  |                      |
|--|--|--|----------------------|
| 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 "LLC". The new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  Muilling 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 office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida  Florida  Florida   | ( <u>Name of the Limited Liabilit</u><br>(A Florida  | ty Company as it now appears on our records.) Limited Liability Company) |                      |
| this amendment is submitted to amend the following:  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 "LLC."  There new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  There new mailing address, if applicable:  Muiling 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 address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida  Florida  Florida   | he Articles of Organization for this Limited Liability C   | Company were filed on FEBRUARY 23, 2023                                  | and assigned         |
| The new 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 "LLC" or the abbreviati | lorida document number 1.23000098485   | <u>_</u>   |                      |
| ne new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  The new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  Inter 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 records, enter the name of the new registered address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida  Florida  | his amendment is submitted to amend the following:   |  |                      |
| nter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  Inter 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 records, enter the name of the new registered address here:  Name of New Registered Agent:  New Registered Office Address:  Emer Florida street address  Florida  | . If amending name, enter the new name of the limi   | ited liability company here:   |                      |
| nter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  Inter 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 records, enter the name of the new registered address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida   |  | 2.11(19)   |                      |
| Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  Muiling 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 and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida   | he new name must be distinguishable and contain the words "Limi  | ited Liability Company, the designation "LLC" or the                     | سند مدره             |
| Inter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  S. If amending the registered agent and/or registered office address on our records, enter the name of the new register and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida   | nter new principal offices address, if applicable:   |  |                      |
| Inter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  3. If amending the registered agent and/or registered office address on our records, enter the name of the new register and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida   | Principal office address MUST BE A STREET ADDR   | (ESS)  | 5                    |
| Inter 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 records, enter the name of the new registered and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida  |  |  | <u> </u>             |
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| New Registered Office Address:  Emer Florida street address  Florida   |  |  |                      |
| Enter Florida street address, Florida  | Name of New Registered Agent:  |  |                      |
| Enter Florida street address, Florida  |  |  |                      |
|  | New Registered Office Address:   | Enter Florida street address   |                      |
|  |  |  |                      |
|  | <del></del>  | , Florida _  | 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

| Title | <u>Name</u>  | Address                       | Type of Action    |
|-------|--------------|-------------------------------|-------------------|
| MGR   | MINTU BISWAS | 3700 ULMERTON ROAD, SUITE 107 | □ Add             |
|       |              | CLEARWATER, FLORIDA 33762     | ■Remove           |
|       |              |                               |                   |
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| Effective date, if other than the famous offective date is listed, the date in Note: If the date inserted in this document's effective date on the | nust be specific<br>block does n | c and cannot be<br>not meet the a | pplicable s                          | of filing or m<br>atutory filin | ore than 90 da | (option:<br>ys after fili<br>its, this da | ing.) Pursua  | nt to 605.020<br>t be listed a |
| e record specifies a delayed effect<br>d is filed.   | tive date, but                   | l not an effecti                  | ive time, a                          | 12:01 a.m.                      | on the earlier | of: (b)                                   | The 90th      | day after the                  |
|  |                                  | 2023                              |                                      |                                 |                |   |               |                                |
| Dated MAY 26   |                                  | ,                                 | ·                                    |                                 |                |   |               |                                |
| Dated MAY 26  Mintu  | Bish                             | -·<br>, cvs :                     | ···································· |                                 |                |   |               |                                |

Filing Fee: \$25.00