

L24000028708

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

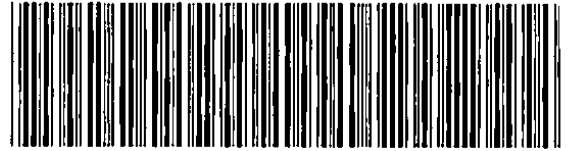
(Business Entity Name)

(Document Number)

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04/22/24--01031--001 **25.00

FILED
24 APR 22 PM 3:07
CLERK OF STATE
TALLAHASSEE, FLORIDA

Tastes and Tales Food Tours, LLC

8249 N. Marinazzo Terrace

Crystal River, FL 34428

(352) 699-1460

April 19, 2024

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Representative,

I am submitting an Article of Amendment to Articles of Organization of Tastes and Tales Food Tours, LLC. This is a new business and I misunderstood when setting this LLC up and did not list myself as the MGR. I am updating my documents, and I can be reached on my cell phone (352) 600-1460 or email hellofernley@gmail.com. Please do not hesitate to call me with any questions.

Regards,


Elizabeth Fernley

Owner/Founder/Manager
Tastes and Tales Food Tours, LLC

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TASTES AND TALES FOOD TOURS, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ELIZABETH FERNLEY

Name of Person

TASTES AND TALES FOOD TOURS, LLC

Firm/Company

8249 N. MARINAZZO TERRACE

Address

CRYSTAL RIVER, FL 34428

City/State and Zip Code

HELLOFERNLEY@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ELIZABETH FERNLEY

352 699-1460
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

TASTES AND TALES FOOD TOURS, 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 JANUARY 16, 2024 and assigned
Florida document number 124000028708.

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)

FILED
24 APR 22 PM 3:07
CLERK OF CIRCUIT COURT
TALLAHASSEE, FLORIDA

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

[illegible]

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

E. Effective date, if other than the date of filing: _____ (optional)

(If an 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 (3)(1)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated APRIL 19, 2024

Elizabeth Fernandez
Signature of a member or authorized representative of a member

ELIZABETH FERNLEY

Typed or printed name of signee