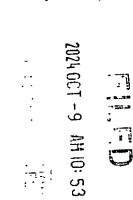
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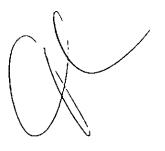
| (Requestor's Name)                      |
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| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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### **COVER LETTER**

|  | gistration Se<br>vision of Cor |   |   |                           |                       |  |  |  |  |
|--|--------------------------------|---|---|---------------------------|-----------------------|--|--|--|--|
| CHOICET.   | BRAND C                        |   |   |                           |                       |  |  |  |  |
| SUBJECT:   |                                | Name of Lin                                     | ited Liability Company  |                           |                       |  |  |  |  |
| The enclose  | d Articles of                  | Amendment and fee(s) are sub                    | omitted for filing.   |                           |                       |  |  |  |  |
| Please return  | n all correspo                 | ondence concerning this matter                  | to the following:   |                           |                       |  |  |  |  |
|  |                                | ONEL JEAN-LOUIS                                 |   |                           |                       |  |  |  |  |
|  |                                |   | Name of Person  |                           |                       |  |  |  |  |
|  |                                | ORILAS TAX SERVICE                              | S   |                           |                       |  |  |  |  |
|  |                                |   | Firm/Company  |                           |                       |  |  |  |  |
|  |                                | 7809 SW ELLIPSE WAY                             | UNIT D2   |                           | <u>~</u>              |  |  |  |  |
|  |                                |   | Address   |                           | 024 (                 |  |  |  |  |
|  |                                | OCT -   |   |                           |                       |  |  |  |  |
|  |                                | onel@orilassecurity.com                         | City/State and Zip Code   |                           | 2024 OCT -9 NM 10: 53 |  |  |  |  |
| Can forth and  | - F                            |   | to be used for future annual report notif                           | ication)                  | M 10: 5               |  |  |  |  |
| ror turaner i  | niormation c                   | oncerning this matter, please c                 | an;   |                           | : <b>ω</b>            |  |  |  |  |
| onel jean-lo   | ouis                           |   | 772 812-9076<br>at ( )  |                           |                       |  |  |  |  |
|  | Name o                         | f Person  |   | : Telephone Number        |                       |  |  |  |  |
| Enclosed is  | a check for th                 | he following amount:                            |   |                           |                       |  |  |  |  |
| <b>■</b> \$25.00 l   | Filing Fee                     | □ \$30.00 Filing Fee &<br>Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified                 | e of Status &         |  |  |  |  |
| Mailing Address: Registration Section Division of Corporations |                                |   | <u>Street Address:</u><br>Registration Sec<br>Division of Cor       |                           |                       |  |  |  |  |
| P.O. Box 6327  |                                |   |   | The Centre of Tallahassee |                       |  |  |  |  |
| Ta   | llahassee, l                   | FL 32314  | 2415 N. Monroc  | Street, Suite 8           | 10                    |  |  |  |  |

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BRAND CATERING 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  $\frac{03/11/2024}{2}$ and assigned Florida document number L24000120887 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.

If Changing Registered Agent, Signature of New Registered Agent

## MGR: Update NAME/AMENDMENT

LAST NAME: PHILIPPE

MIDDLE NAME: LAROSE

FIRST NAME: SERFINE

MGR ADDRESS: 1541 SE SOUTHBALCOURT CT

CITY: PORT SAINT LUCIE FL,34952

To whom it may concern

My name is Serfine Larose Philippe. I would like to update my name as there was an error on sunbiz. It needs to be done asap.

A Selma las poles

My First name is serfine, middle name is Larose, and my last name is Philippe.

I also attached an original document in case needed

My Company Name is Brand Catering Services LLC

Document# L24000120887

2024 OCT -9 AH 10: 5;

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>                           | Address                             | Type of Action              |
|--------------|---------------------------------------|-------------------------------------|-----------------------------|
| MGR          | PHILIPPE LAROSE SERFINE               | 1541 SE SOUTHBALCOURT CT PORT SAINT | LUC<br>■Add                 |
|              |                                       |                                     | □Remove                     |
|              |                                       |                                     | □Change                     |
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| LAST   | NAME: PHILIP   | PE MIDDLE?                            | NAME LAR                                  | OSE FIRST      | NAME SER                            | FINE                          |  |             |                         |                |
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| in effective di<br>o <mark>te:</mark> If the c | e, if other tha<br>ate is listed, the da<br>late inserted in<br>Efective date on | ite must be speci:<br>this block does | filing:<br>fic and cannot<br>not meet the | applicable:    | e of filing or r<br>statutory filin | nore than 90 dang requirement | _ <b>(option</b><br>ays after fil<br>nts, this d | ing.) Pursu | ant to 60.<br>ot be lis | 5.020<br>ted a |
| . ====   | 2 3314 1/11  | shammer                               |   |                |                                     |                               |  |             |                         |                |
| ecord speci<br>is tiled.                       | fies a delayed e   | fective date, b                       | ut not an effe                            | ective time, a | t 12:01 a.m.                        | on the earlie                 | er of: (b)                                       | The 90th    | day afte                | er the         |
| 09/06/<br>nted                                 | 2024   |                                       | ·   | ^              |                                     |                               |  |             |                         |                |
|  | ^  | ,                                     |   | $f_i$          | .÷.                                 |                               |  |             |                         |                |

Filing Fee: \$25.00