L24000191650

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(Document Number)
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COVER LETTER

SUBJECT:	ROSI FOOD	MARKET LLC			
3013(1	Name of Lim	ited Liability Company			
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspor	ndence concerning this matter	to the following:			
	OS	SMAN A VILLATORO			
		Name of Person			
	ROS	I FOOD MARKET LLC			
Firm ² Company					
	7800 C	OLLINS AVENUE UNIT 401			
Address					
MIAMI BEACH, FLORIDA 33141 City/State and Zip Code					
		to be used for future annual report noti	fication)		
for further information ec	meerning this matter, please ea	all:			
OSMAN A VILLATORO 305 490-9595 at ()					
Name of	Person	Area Code Daytim	e Telephone Number		
Enclosed is a check for th	o 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)		

TO:

Registration Section Division of Corporations

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

ROSI FOOD	MARKET LLC	
(Name of the Limited Liabili (A Florida	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C Florida document number 1.24000191650	, ,	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the lim</u>	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited 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 ADDI	RESS)	
Enter new mailing address, if applicable:	·	
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>enter the</u>	name of the new registe
Name of New Registered Agent:		,
New Registered Office Address:	Enter Florida street address	· ·
	Pl.,	d.,
	City:	daZip 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 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	OSMAN A VILLATORO	7800 COLLINS AVENUE UNIT 401	= Add
		MIAMI BEACH, FLORIDA 33141	□Remove
			□Change
MGR	OSMANY A VILLATORO	7800 COLLINS AVENUE UNIT 401	□ Add
		MIAMI BEACH, FLORIDA 33141	= Remove
			🗆 Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add ,
			□Remove
			Change
		·	□Adđ
			□Remove
			□Change

Title: MGR		
Osman A Villatoro		
7800 Collins Avenu	ue Unit 401	
Miami Beach, Ft 33	3141	
		
	 	
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	·	
	05/03/2024	
Note: If the date inserted in	date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pure this block does not meet the applicable statutory filing requirements, this date will	
document's effective date or	in the Department of State's records.	-
e record specifies a delayed or rd is filed.	effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90	th day after the
Dated MAY 3	2024	<u>*</u>
		

Filing Fee: \$25.00