

10/20/21, 7:54 AM

Division of Corporations

M1900004012

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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Division of Corporations  
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Account Number : FCA000000023  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**  
**DARIFAIR FOODS, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

OCT 21 2021

S. PRATHER

2021 OCT 20 AM 8:05

TALLAHASSEE, FLORIDA

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# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Darifair Foods, LLC

Enter new principal office 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)

2. The Florida document number of this limited liability company is: M119000004012

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 04/19/2019

## SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: Rubix Foods, LLC  
(must contain "Limited Liability Company," "LLC," or "LLC")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "LLC," or "LLC.")

6. If amending the registered agent and/or registered officer 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:

*Thereby 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

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

\_\_\_\_\_

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

\_\_\_\_\_

<u>Title/Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

*Alan A. Weed*

Signature of the authorized representative

Alan A. Weed

Typed or printed name of signee

Filing Fee: \$25.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "DARIFAIR FOODS, LLC", CHANGING ITS NAME FROM "DARIFAIR FOODS, LLC" TO "RUBIX FOODS, LLC", FILED IN THIS OFFICE ON THE NINETEENTH DAY OF OCTOBER, A.D. 2021, AT 8:26 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF AMENDMENT IS THE TWENTIETH DAY OF OCTOBER, A.D. 2021.



7378416 8100  
SR# 20213546028

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 204444159  
Date: 10-19-21

State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 08:26 AM 10/19/2021  
FILED 08:26 AM 10/19/2021  
SR 20213546028 - File Number 7378416

**CERTIFICATE OF AMENDMENT  
OF  
CERTIFICATE OF FORMATION  
OF  
DARIFAIR FOODS, LLC**


1. The name of the limited liability company is: Darifair Foods, LLC.
2. The Certificate of Formation of the limited liability company is hereby amended as follows:

The name of the limited liability company is changed to:

Rubix Foods, LLC

3. This Certificate of Amendment shall be effective on October 20, 2021.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Amendment as of this 19th day of October 2021.

By:   
Name: Alan A. Weed  
Title: Vice President and Assistant Secretary