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## **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT:	mellia & Ko	adis Cafe LL mited Liability Company	C
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
	Janice	Benjamin-Ree Name of Person	25 <u>6</u>
For further information of	E-waii address:	Address  On F19 33  City/State and Zip Code  (e 3 2 3 9 maj 1)  (to be used for future annual report noti	fication)
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	he following amount:		
S25.00 Filing Fee	XI \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres	<u>s:</u>	Street Address:	

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

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

Camella + Kalo (Name of the Limited Liability Comp	pany as it now appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Companies Florida document number $\frac{L  3000 55 20}{}$	I
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia  Coffee Nation  The new name must be distinguishable and contain the words "Limited Liab	
Enter new principal offices address, if applicable:	1612 frowmere Drive
(Principal office address MUST BE A STREET ADDRESS)	Brannon, = a 335"
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address, Florida
iew Registered Agent's Signature, if changing Registered Agent-	City Zip Code

## gent'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.

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record sp Lis filed.	ecifies a delayed ef	fective date, but n	not an effective tin	ne, at 12:01 a.m			•
ated	april	14	2025	<u> </u>	Janei	ce Ben	garin-F
		Signature of	a member or author	ized representati	ve of a member	<u>-</u>	
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Filing Fee: \$25.00