L19000137679

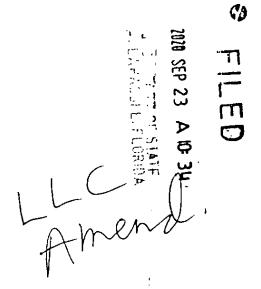
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 15, 2020

BEVERLY R. SHRIVER III 111 S. PINEAPPLE AVE., UNIT 601 SARASOTA, FL 34236

SUBJECT: MOJO COFFEE BAR, LLC

Ref. Number: L19000137679

We have received your document for MOJO COFFEE BAR, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6842.

Letter Number: 720A00017563

Deborah Bruce Corporate Records Supervisor II

www.sunbiz.org

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COVER LETTER

TO:	Registration Sec Division of Corp		ŧ	•
	моло соғ	FEE BAR, LLC		Ŷ
SUBJI	ECT:	Name of Limi	ted Liability Company	<u> </u>
		Amendment and fee(s) are submidence concerning this matter		
	·	Beverley R. Shriver III	·	
			Name of Person	
		Mojo Coffee Bar, LLC		
			Firm/Company	
		111 S. Pincapple Ave., Uni	1 601	
			Address	
		Sarasota, FL 34236		
		Beaver@TheShriverGroup.e	City/State and Zip Code	
		E-mail address: (t	o be used for future annual report not	ification)
For fur	ther information co	oncerning this matter, please ca	ıll:	
Bever	ley R. Shriver III		724 312-0824	
	Name of	Person	at () Area Code Daytin	ntification) me Telephone Number
Enclos	ed is a check for the	e following amount:		
■ \$2	5.00 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

MOJO COFFEE BAR, LLC (Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our recor Liability Company)	<u>ds.</u>)	.
The Articles of Organization for this Limited Liability Company L19000137679 Lorida document number	were filed on May 22, 2019		and assigned
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LL	C" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:			(5
Principal office address MUST BE A STREET ADDRESS)) v	2020
		<u> </u>	*0.530
		7	
Inter new mailing address, if applicable:		/ : · / · · · · 4	23
• • •			→
Mailing address MAY BE A POST OFFICE BOX)		<u></u>	-
			~~~~
3. If amending the registered agent and/or registered office gent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, <u>ente</u>	r the name	of the new regi
N. Davistand Office Address.			
New Registered Office Address:	Enter Florida street addre	2.5.5	
	, <b>F</b>	lorida	

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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Christian Nye	829 Forestview Dr., Sarasota, FL 34232	<b>=</b> Add
			□Change
			□Add
			Remove
			Change
			□Add
			□Remove
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ffective date, if other than the an effective date is listed, the date must be locument's effective date on the December 2.	st be specific and cannot be pri ock does not meet the appl	icable statutory filing i	(optional) e than 90 days after filing.) Pure requirements, this date will	suant to 605.020 not be listed as
e record specifies a delayed The 90th day after the rec	d effective date, but r ord is filed.	not an effective tin	ne, at 12:01 a.m. on t	:he earlier o
July 22	2020			
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