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COVER LETTER

TO:

	egistration Se ivision of Cor					
CUD IDOT		a and Salad, LLC				
SUBJECT	:	Name of Lim	ited Liability Company			
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please retu	rn all correspo	ndence concerning this matter	to the following:			
		Jeffrey Stern				
			Name of Person			
		BedRoc Pita and Salad, LL	.C			
			Firm/Company			
		4396 Pine Tree Drive				
			Address	· 		
		Address Miami Beach, FL 33140 City/State and Zip Code paramountbakery.com@icloud.com E-mail address: (to be used for future annual report notification)				
			City/State and Zip Code			
		· · ·				
		E-mail address: (to be used for future annual report no	otification)		
For further	information c	oncerning this matter, please c	all:			
Edward Ra	iymond		305 877-1994			
	Name o	f Person	Area Code Dayt	ime Telephone Number		
Enclosed is	s a check for th	ne 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)		
			Street Address: Registration S	Section		
	-					
BedRoc Pita and Salad, LLC Firm/Con 4396 Pine Tree Drive Addre Miami Beach, FL 33140 City/State and paramountbakery.com@icloud.com E-mail address: (to be used for fut) For further information concerning this matter, please call: Edward Raymond Name of Person The second state of States are second sec						
Т	allahassee, l	FL 32314	2415 N. Mon	Daytime Telephone Number Solution Section Se		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Compa (A Florida Limited I	ny as it now appear	s on our records.)	
The Articles of Organization for this Limited I Florida document number L19000146505	_iability Company			and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	ility company he	e <u>re</u> :	
N/A				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the d	esignation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	N/A	<u></u>	
(Principal office address MUST BE A STRE	ET ADDRESS)			2019 DE
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A		EC-9 PHIZ: 58
B. If amending the registered agent and/or agent and/or the new registered office address.		address on our r	ecords, <u>enter the</u>	name of the new register
Name of New Registered Agent:	Jeffrey Stern			<u> </u>
New Registered Office Address:	4396 Pine Tree			
-		Enter Floi	rida street address	
	Miami Beach		, Florida	33140
		City		Zip 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 Changing Registered Agent, Signature of New Registered Agent

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>	<u>Address</u>	Type of Action
VP	Norman Rausman	20 Hershel Terrace	≡ Add
		Monsey, New York 10952	□Remove
			□ Change
VP	Edward Raymond	18821 SW 74th Court	= Add
		Cutler Bay, FL 33157	Remove SECTA
SEC_	zachary Stern	MIAMI BEACH, FL	WANTED TO THE PARTY OF THE PART
		MIAMI BEACH, FC 33140	Remove
			□ Add
			□Remove
			□Change
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e record rd is fil	rd specities a del led.	ayed effectiv	e date, but no	t an effective	time, at 12:01	a.m. on the ea	rlier of: (b)	The 90th	ı day afte	r the
Dated	December 5,		Hen	. 2019 	·					
		77	Signature of a	member or au	thorized represe	ntative of a men	iber			

Filing Fee: \$25.00