

h20000390316

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

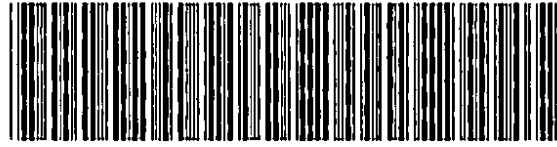
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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01/13/21--01015--004 **25.00

2021 JAN 13 PM 2:06
CORPORATE SERVICES
PARTIAL FILING UNIT

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US
2/11/21

COVER LETTER

Registration Section
Division of Corporations

Gonzalez's Sweet House, LLC

JECT: _____
Name of Limited Liability Company

enclosed Articles of Amendment and fee(s) are submitted for filing.

se return all correspondence concerning this matter to the following:

Moises A. Saltiel

Name of Person

Saltiel Law Group

Firm/Company

2600 S. Douglas Rd., Ste. 502

Address

Coral Gables, FL 33134

City/State and Zip Code

moises@saltiellawgroup.com

E-mail address: (to be used for future annual report notification)

for further information concerning this matter, please call:

Moises A. Saltiel at (305) 735-6565

Name of Person Area Code Daytime Telephone Number

enclosed is a check for the 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)

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

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Gonzalez's Sweet House, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Articles of Organization for this Limited Liability Company were filed on December 14, 2020 and assigned
the document number L20000390316.

An amendment is submitted to amend the following:

amending name, enter the new name of the limited liability company here:

Every name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

new principal offices address, if applicable:

12851 SW 149 St.

Principal office address MUST BE A STREET ADDRESS

Miami, FL 33186

new mailing address, if applicable:

12851 SW 149 St.

Mailing address MAY BE A POST OFFICE BOX

Miami, FL 33186

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SECRETARY OF STATE
TALLAHASSEE, FL

amending the registered agent and/or registered office 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

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 understand the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is 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

ending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added
removed from our records:

M = Manager

MR = Authorized Member

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

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SOUTHERN DISTRICT
TALLAHASSEE, FL

If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

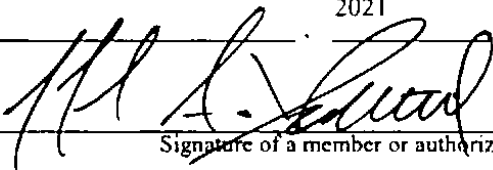
Multiple horizontal lines for amending information.

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DEPARTMENT OF STATE
MILLIN STREET

Effective date, if other than the date of filing: _____ (optional)

If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the document is filed.

dated January 8, 2021


Signature of a member or authorized representative of a member

Moises A. Saltiel

Typed or printed name of signee

Filing Fee: \$25.00