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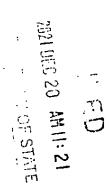
A. RIVERSJAN 0.7 2022



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COVER LETTER

TO: Registration S Division of Co			
SUBJECT: Lap	py Melting LLC	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Estefanía To	urre	
	Happy Meltin	Name of Person ———————————————————————————————————	
	7910 west: Pr.		
	North Bay Villa	rge, FL. 33134 City/State and Zip Code	
	alignume (a E-mail address: (9 may/. Com The used for future annual report not	ification)
For further information c	oncerning this matter, please ca		
Estefania Name o	Torre	at (<u>78 G</u>) <u>365 -</u> Area Code Daytin	7766 ne Telephone Number
Enclosed is a check for th	ne following amount:		
	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

Hanny Mel	fine LLC	
		ny as it now appears on our records.)
The Articles of Organization for this Limited Li Florida document number <u>L 21000389</u>	ability Company 545	were filed on
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of		lity Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if application of the second of the	able:	1910 west dr. apt. 301 North Bay Village, Fl. 33134
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	
B. If amending the registered agent and/or r agent and/or the new registered office addre	ss here:	address on our records, enter the name of the new registere
Name of New Registered Agent:	Csteta	nía arre
New Registered Office Address:	North	H. dr. ap + 30 Company Tollage Enter Florida street address Buy Village Florida 53 134
New Registered Agent's Signature, if changing l	Registered Agent:	ree to act in this capacity. I further agree to comply with the
I herahy accent the appointment as registere	ed agent and age	ee to act in this capacity. I further agree to comply with the

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 of removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Estefanía Tarre	7910 west Dr. apt. 301	//////////////////////////////////////
		7910 West Dr. apt. 301 North Bay village, FL. 3	33/3 ⊈ □Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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			🗆 Add
			Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□ Change

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m effective date is ote: If the date	fother than the date of filing:
is filed.	a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after t
ited <u>Vov</u>	ember 30 2021.
	Signature of member or authorized representative of a member
	Esterania Tarre Typed or printed name of signee
	()Tetania larve.