

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet**L21000436460**

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(((H22000366507 3)))



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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : REGISTERED AGENTS INC.
Account Number : I20090000081
Phone : (307)200-2803
Fax Number : (855)330-1010

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
L & K ICE CREAM LLC

Certificate of Status	0
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Corporate Filing Menu

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K. SALY

OCT 27 2022

2022 OCT 26 AM 10:36

2022 OCT 26 PM 4:17
ALL REQUESTS FOR
CERTIFICATION

FILED

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

L & K ICE CREAM LLC

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

FILED
2022 OCT 26 PM 4:17
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 10/05/21 and assigned Florida document number L21000436660.

This amendment is submitted to amend the following:

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

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If 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

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>	<u>Type of Action</u>
MGR	PAUL NGUYEN	5120 76TH ST N	☐ Add
		ST PETERSBURG, FL 33709	☒ Remove
			☐ Change
AMBR	Cathy N Tran	5120 76TH ST N	☒ Add
		ST PETERSBURG, FL 33709	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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			☐ Remove
			☐ Change

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DATE 06-26-2014 BY 60322 UCBAW/STP/HOR/STP

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(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)

If the 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 record is filed.

Dated 10/26, 2022

Morgan Potter

Signature of a member or authorized representative of a member

Morgan Noble

Typed or printed name of signee

Filing Fee: \$25.00