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COVER LETTER

Tallahassee, FL 32314

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emp nec	**F*_	Happpybirtl	nday pinateria Ilc				
SUBJECT:		Name of Limited Liability Company					
The enclo	osed	Articles of A	Amendment and fee(s) are su	bmitted for filing.			
Please ret	turn	all correspor	ndence concerning this matte	er to the following:			
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				Name of Person			
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For furthe	r inf	ormation co	ncerning this matter, please o	(to be used for future annual	report notification)		
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		Name of I	Person	at () Area Code	Daytime Teleph	one Number	
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2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HAPPPYBIRTHDAY PINATERIA LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{3/17/2020}{1}$ and assigned Florida document number L20000088089 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: HAPPYBIRTHDAY PINATERIA LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

. Florida

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>	Address	Type of Action
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