(Req	uestor's Name)	
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S. WARREN

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COVER LETTER

TO: Registration Se Division of Cor		•	
	PIZZA, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Ricardo Warman		
		Name of Person	
	WARMAN PIZZA, LLC		
		Firm/Company	
	7695 SW 104th ST ste 100	•	
	-	Address	
	Pinecrest, FL 33156		
		City/State and Zip Code	
	rickywarman@gmail.com		
		to be used for future annual report notif	ication)
For further information c	oncerning this matter, please ca	all:	
Ricardo Warman		305 663-1750	
Name o	f Person		Telephone Number
Enclosed is 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)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WARMAN PIZZA, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our reconability Company)	ords.)
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L03000033939}{L03000033939}$.	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "I	J.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7695 SW 104TH ST STE 100	
(Principal office address MUST BE A STREET ADDRESS)	PINECREST, FL 33156	
Enter new mailing address, if applicable:	7695 SW 104TH ST STE 1	00
(Mailing address MAY BE A POST OFFICE BOX)	PINECREST, FL 33156	
registered agent and/or the new registered office address here Name of New Registered Agent:	<u>:</u>	
New Registered Office Address:		
New Regișierea Office Address.	Enter Florida street ada	lress .
	,	Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pheing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, provided for in Chapter 60	and I am familiar with and 5, F.S. Or, if this document is
If Chan	ging Registered Agent, Signatu	re of New Registered Agent
Page 1	of 3	

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
MGR	WARMAN, RICARDO	7695 SW 104TH ST STE 100	
		PINECREST, FL 33156	□ Remove
		· ·	← Change
			Remove
			Change
			Add
			□ Remove
			☐ Change
			Add
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	<u> </u>	
ective date, if other than the date	e of filing:	(optional)
effective date is listed, the date must be s	specific and cannot be prior to date of filing or more than 90	
effective date is listed, the date must be s e: If the date inserted in this block of	pecific and cannot be prior to date of filing or more than 90 does not meet the applicable statutory filing requiren	days after filing.) Pursuant to 605
e: If the date inserted in this block of ument's effective date on the Depart	specific and cannot be prior to date of filing or more than 90 does not meet the applicable statutory filing requiren timent of State's records.	days after filing.) Pursuant to 605 nents, this date will not be liste
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