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COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

eud iezer	The Kitcher	n Cooking School & Store, LL	.c	
SUBJECT:	-	Name of Lim	nited Liability Company	-
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Ze'Shieca Carter		
			Name of Person	_
			Firm/Company	_
1008 Cottonwood Street				
			Address	
		Leesburg, FL 34748		
			City/State and Zip Code	
		Zecarter12@gmail.com		-
For further in	nformation c	E-mail address: (oncerning this matter, please c	(to be used for future annual report notification)	
Ze'Shieca C	arter		352 455-4915 at ()	25.
	Name o	f Person	at ()	per Till 19
Enclosed is a	check for th	ne following amount:		C 19
■ \$25.00 F	filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certifi (additional copy is enclosed) Certifi	Filing Fee, cate of Status & ed Copy nal copy is enclosed)
Mailing Address: Registration Section Division of Corporations			Street Address: Registration Section Division of Corporations The Contract of Tollahossee	
P.O. Box 6327			The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Kithen Cooking School & Store, 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 $\frac{06/04/2004}{}$ and assigned Florida document number L04000042899 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Soul-La-Tea, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 1008 Cottonwood Street Enter new principal offices address, if applicable: Leesburg, FL 34748 (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 Agents New Registered Office Address: Enter Florida street address Florida 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

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional) (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 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. Signature of a member or authorized representative of a member

E. 635.00

Typed or printed name of signee

Ze'Shieca Carter, MGR