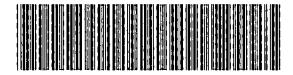
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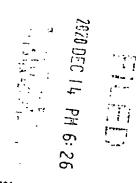
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JAN 2 8 2021

S. YOUNG



D'BEST SANDWICH SHOP 5201 N. DIXIE HWY, BOCA RATON, FL33487 561 241 5155 DBESTSUBS@GMAIL.COM

December 7th

Aegean LLC

Reg #: G07304900100 FEIN: 06-1827653

To Whom It May Concern,

Please change my wife's name as manager on our Sunbiz listing from Susannah Amygdalitsis to her full official name of Katharine Susannah Amygdalitsis.

Regards

Johnny Amygdalitsis

Cell: 561 714 5549

COVER LETTER

O: Registration Se Division of Cor			
UBJECT:	Alge CV (Name of Limi	ted Liability Company	
Γhe enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
·	John	ny Amygda Name of Person	litsis
	D'Bes	t Sandwich Firm/Company	Shop
	5201	N. Divie H	wy
	Boca R	City/State and Zip Code S & 9 MCU to be used for future/annual report note	33487_
	d bestsi E-mail address: (1	to be used for future annual report not	fication)
For further information of	concerning this matter, please ca		
Johnny Ar Johnny Ar	nygdalitsis	at (Sb1) 714 Area Code Daytim	5549 ne Telephone Number
Enclosed is a check for t	he following amount:		
S25.00 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 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

91	
Aegean LLC	
 (Name of the Limited Limited Company as it now appears on our records.) (A Florida Limited Liability Company)	

The Articles of Organization for this Limited Liabi Florida document numberL_O7_00010		$\frac{130 2007}{30 2007}$ and assigned.
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of th	e limited liability company here:	
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designa	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicabl	e:	
(Principal office address MUST BE A STREET A	(IDDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or regi		ds, enter the name of the new registered
Name of New Registered Agent:	(name covile	tion)
New Registered Office Address:	Enter Florida st	reet 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:there 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

f amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added: r.removed from our records:

1GR = Manager 1MBR = Authorized Member

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effective date is li	ted, the date must be serted in this block of	specific and cannot	be prior to date of	filing or more than	90 days after fili	ng.) Pursuant to 605.0
	date on the Depart			nory ming requi	rements, tins da	ite will not be had
ord specifies a of filed.	elayed effective dat	e, but not an effe	ective time, at 12	2:01 a.m. on the	earlier of: (b)	The 90th day:after:
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