208000002031

| (Req | uestor's Name) | |
|---------------------------|------------------|-----------|
| (Add | lress) | |
| (Add | lress) | |
| (City | /State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bus | iness Entity Nan | ne) |
| (Doc | cument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to F | iling Officer: | |
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Office Use Only



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COVER LETTER

| | distration Sec ision of Corp | | r | |
|--------------------|---------------------------------|--|---|---|
| SUBJECT: | | JNNY HOLDINGS, LLC | | · |
| oubject. | | Name of Lim | ited Liability Company | |
| The enclosed | l Articles of a | Amendment and fee(s) are sub- | mitted for filing. | |
| dease return | all correspo | ndence concerning this matter | to the following: | |
| | | DANIEL M. KELLY | | |
| | | | Name of Person | |
| | | | Firm/Company | |
| | | 1800 MARINA CIR | | |
| | | | Address | |
| | | N. FT. MYERS, FL 33903 | | |
| | | DKELLYCRE@GMAIL.C | City/State and Zip Code OM | |
| | | E-mail address: () | to be used for future annual report no | otification) |
| For further in | nformation co | oncerning this matter, please ca | all: | |
| DAN KELL | Y | | 239 229-7019 at () | |
| | Name of | Person | Area Code Dayti | me Telephone Number |
| Enclosed is a | check for th | e following amount: | | |
| ■ \$25.00 F | 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

22100. 18 PHZ-23

HUNNY BUNNY HOLDINGS, 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 Compa Florida document number L08000002031 | any were filed on 1/7/2008 | and assigned |
|---|------------------------------------|---------------------------------------|
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited li | iability company here: | |
| The new name must be distinguishable and contain the words "Limited Li | iability Company," the designation | on "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDRESS) | <u> </u> | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | |
| B. If amending the registered agent and/or registered offic agent and/or the new registered office address here: | ce address on our records, | enter the name of the new registered |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| New Registered Office Address. | Enter Florida stree | t 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 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 | The Type of Action |
|--------------|------------------|------------------------|--------------------|
| MGR | SUZANNE H. KELLY | 1800 MARINA CIR | - |
| | | N. FT. MYERS, FL 33903 | = Remove |
| | | | Change |
| MGR | DANIEL M. KELLY | 1800 MARINA CIR | ■Add |
| | | N. FT. MYERS, FL 33903 | □Remove |
| | | | Change |
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| (If an el <u>Note:</u> | tive date, if ot flective date is list If the date ins- ment's effective | ed, the date merted in this | ust be specific . block does no | and cannot be of meet the a | prior to date o | f filing or mor tutory filing | e than 90 c requirem | _ (optio lays after f ents, this | nal) illing.) Pr date wi | ursuant to 605.0 | 0207 (3)(b d as the |
| f the reco record is f | ord specifies a delified. | elayed effect | ve date, but i | not an effect | ive time, at 1 | 2:01 a.m. on | the earli | er of: (b) | The 9 | 0th day after | the |
| Dated | OCTOBER I | | M_(| 2020 | · | | | | | | |

Filing Fee: \$25.00

Typed or printed name of signee