L08000005810

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to I	Filing Officer:	
		





900323907279

02/01/19--01020--013 **25.00

FILED Feb 13, 2019 08:00 AM Secretary of State







DOROTHY E. PEARCE

Paralegal email: dpearce@marksgray.com tel: 904.807.2109 fax: 904.399.8440

January 31, 2019

Via Federal Express

Division of Corporations
LLC Name Change
Clifton Building
2661 Executive Center Circle
Tallahassee FL 32301

FILED Feb 13, 2019 08:00 AM Secretary of State

Re: Articles of Amendment for Shiawassee Holdings, LLC to

Change name to More Cake, LLC

Our File 30492

Dear Sir or Madam:

Enclosed are our check for the \$25 filing fee as well as original, executed Articles of Amendment changing the name to More Cake, LLC.

After the amendment has been filed and the name changed, please return a file-stamped copy of the Articles of Amendment to me in the enclosed, self-addressed stamped envelope.

Thank you for your assistance. Please call or email me with any questions or issues.

Sincerely,

(1)

Dorothy E. Pearce, Paralegal

COVER LETTER

Divis	sion of Corpo	rations			
SUBJECT:	Shiawassee	Holdings, LLC			
oobober.		Name of Limite	d Liability Company		
The enclosed	Articles of Ar	nendment and fec(s) are subm	itted for filing.		
Picase return	all correspond	ence concerning this matter to	the following:		
		Nicholas V. Pulignano, Jr.			
		-	Name of Person	· · · · · · · · · · · · · · · · · · ·	<u>.</u>
		Marks Gray, P.A.			
			Firm/Company		
		1200 Riverplace Blvd., Su	• -		
			Address		
		Jacksonville, FL 32207			
			City/State and Zip Code		
		nvp@marksgray.com			
		E-mail address: (to	be used for future annual r	eport notification)	
For further inf	formation con	cerning this matter, please call	:		
Nicholas V. I	Pulignano, Ji	.		07-2105	
Name of Person Area				Daytime Telephone N	umber
Enclosed is a	check for the	following amount:			
■ \$25.00 Fil	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is encl.)	Cer osed) Cer	00 Filing Fee, tificate of Status & tified Copy litional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

FILED Feb 13, 2019 08:00 AM Secretary of State

SHIAWASSEE 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 Liabilit	y Company	were filed on January 1	6, 2008	_ and assigned		
Florida document number L08000005810	·					
This amendment is submitted to amend the following	ç:					
A. If amending name, enter the new name of the l	limited liabi	lity company here:				
More Cake, LLC						
The new name must be distinguishable and contain the words "!	Limited Liabili	ty Company," the designation	"LLC" or the abbr	eviation "L.L.C."		
Enter new principal offices address, if applicable:		4756 WAVERLY LANE				
(Principal office address MUST BE A STREET AD	ment is submitted to amend the following: ding name, enter the new name of the limited liability company here: LLC must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." principal offices address, if applicable: diffice address MUST BE A STREET ADDRESS) mailing address, if applicable: direct MAY BE A POST OFFICE BOX) ACKSONVILLE, FL 32210 ACKSONVILLE, FL					
			· · · · · · · · · · · · · · · · · · ·	·		
			_			
Enter new mailing address, if applicable:		4756 WAVERLY LANE				
(Mailing address MAY BE A POST OFFICE BOX)	1	JACKSONVILLE, FL 32210				
B. If amending the registered agent and/or re registered agent and/or the new registered office a	egistered off oddress here	fice address on our re :	ecords, <u>enter th</u>	e name of the nev		
Name of New Registered Agent: Mo	nett K. Brev	ver				
New Registered Office Address: 479	4756 WAVERLY LANE					
	Enter Florida street address					
JA	CKSONVILL	.E	mpany here: pany," the designation "LLC" or the abbreviati WAVERLY LANE (SONVILLE, FL 32210 WAVERLY LANE (SONVILLE, FL 32210 Idress on our records, enter the n	10		
		City	<u> </u>	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 Changing Registered Agent, Signature of New Registered Agent

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
			Change
			Add
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an effe <u>ote:</u> I	erive date is listed If the date insert	er than the date , the date must be s ed in this block d ate on the Depart	secific and o oes not mo	cannot be pri	ior to date of licable stati	filling or mor	e than 90 days	optional) after filing.) s, this date w	Pursuant to 605 rill not be list	5.0207 ed as
reco	ord specifies 90th day afto	a delayed eff er the record	ective da s filed.	ate, but r	not an ef	fective tir	ne, at 12:	01 a.m. o	n the earli	er o
ated _	January 2	<u> </u>	1 1	2019						
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Page 3 of 3

Filing Fee: \$25.00