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To:

Division of Corporations

Fax Number : (850)617-6383

Fram:

Account Name : LEGALZOOM.COM INC.

Account Number : I2001000062 : (323)952-8600 Fax Number : (323)389-0502

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.



LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MAMA BELLA PIZZA LLC

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K. SALY

JUL 1 2 2024

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COVER LETTER

Division of Co			:			
MAMA B	ELLA PIZZA LLC					
Name of Limited Liability Company						
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filling.				
Please return all correspo	ondence concerning this matter	to the following:	i			
	Mike Town		'			
	<u> </u>	Name of Person				
	Legalzoom.com, Inc.					
		Firm/Company				
	9900 Spectrum Dr					
		Address				
	Austin, TX 78717					
	mamabellapizza@gmail.co	City/State and Zip Code	,			
		to be used for future annual report notif	ication)			
For further information of	concerning this matter, please c	all:				
Mike Town		800 773-0888				
Nате с	f Person	Area Code Daytime	e Telephone Number			
Enclosed is a check for t	he 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

MAMA BELLA PIZZA LLC

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

2024 JUL 11 AM 4:02
MALLAMASSIFFICORIO,

(Name of the Limited Liability Company as it now appears on our records.)

	(11 to the training bleshir)	and the state of t	,
The Articles of Organization for this Limited	•	filed on 11/29/2011	and assigned
Torida document number L11000134638	·		
his amendment is submitted to amend the fo	lowing:		
. If amending name, enter the new name	of the limited liability co	ompany here:	•
Rudy's Pizza, LLC			
he new name must be distinguishable and contain the	words "Limited Liability Con	apany," the designation "LLC" or the	abbreviation "L L C"
inter new principal offices address, if appli	cable:		
Principal office address MUST BE A STRE	ET ADDRESS)		
			ŀ
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	<u> </u>		
			· -
. If amending the registered agent and	l/or registered office a	ddress on our records, ente	r the name of the
egistered agent and/or the new registered of			
Name of New Projectand Agent	Jilda Bajrami		
Name of New Registered Agent:			
New Registered Office Address:	17 SE 19th Ave		
		Enter Florida street address	
	Pompano Beach	Florida 💆	33060
	Ci		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 Registe nature of New Registered Agent

MGR = Manager

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

<u>Title</u>	uthorized Member <u>Name</u>	<u>Address</u>	Type of Action
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			□ Remove
			El Oh
			Crange
			To D Remove
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			П Кеточе
			Change

			□ Remove

□ Remove

□ Change

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E. Ei	Frective date, if other than the on effective date is listed, the date mu	e date of filing:	g or more than 90 days after filing.) Purs	mnt to 605 (1207 (3)(b)
N	ote: If the date inserted in this bocument's effective date on the D	lock does not meet the applicable statutor	y filing requirements, this date will n	ot be listed as the
u.	Addition a creative date on the L	repaiding of State 3 records.		
If the	e record specifies a delaye	d effective date, but not an effect	tive time, at 12:01 a.m. on th	ne earlier of:
(b)	The 90th day after the rec	cord is filed.		
_	ated <u>06-28-</u>	2024		
D	ated 1/6 / \documents	2029,		
		30 mututes		
		Signature of a intember or authorized represen	ntative of a member	
	Abbi Bajrami			
		Typed or printed name of sig	noe	

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