412000141882

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COVER LETTER

Bakery Lake Nona, LLC		•	
Name of Limi	ted Liability Company		
Amendment and fee(s) are subj	nitted for filing.		
Ryan Wesner			
	Name of Person		
	Firm/Company		
11954 Narcoossee Rd Suite	2 - 286		
	Address		
Orlando, FL 32832	City/State and Zin Code		
rwesner@wesnereps.com	•		
		ntification)	
oncoming this matter, piease ca	813 928-9508		
f Person	at () Area Code Dayti	me Telephone Number	
ne following amount:			
□ \$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	
<u>ss:</u>	Street Address:	Section	
7	Registration Section Division of Corporations		
Section Corporations		orporations	
	Name of Limi Amendment and fee(s) are substanted concerning this matter in Ryan Wesner 11954 Narcoossee Rd Suite Orlando, FL 32832 rwesner@wesnereps.com E-mail address: (concerning this matter, please concerning this matter, please concerning this matter, please concerning this matter in San Oo Filing Fee & Certificate of Status	Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: Ryan Wesner Name of Person	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Woof Gang Bakery Lake Nona, LLC					
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)				
The Articles of Organization for this Limited Liability Company Florida document number L12000141882 This amendment is submitted to amend the following:	were filed on 11/08/2012	and assigned			
A. If amending name, enter the new name of the limited liab	ility company here:				
Franchising is a Team Sport, LLC					
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the a	bbreviation "L.L.C."			
Enter new principal offices address, if applicable:	11954 Narcoossee Rd				
(Principal office address MUST BE A STREET ADDRESS)	Suite 2 - 286				
(Finespar office dadress rices - 52 is	Orlando, 32832				
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the nai	ne of the new registered			
Name of New Registered Agent:					
New Registered Office Address:	Enter Florida street address	ZUZZ OCT			
	, Florida, Florida	in Zip Codu			
New Registered Agent's Signature, if changing Registered Agent					
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and 1 am provided for in Chapter 605, F.S. Of	i Januttar भूगाम and r, if this document is			

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

or removed from our records: MGR = Manager AMBR = Authorized Member Title <u>Name</u> <u>Address</u> Type of Action _____ □Remove _____ □Remove _____ □Change _____ 🗀 Add

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Per all and the street box 6	ka data af fili				(ontional)	
Effective date, if other than t	ust be specific a	ind cannot be pr	ior to date of filing	or more than 90 c	lays after filing.)	Pursuant to 605.0
Note: If the date inserted in this document's effective date on the	Department of	t meet the app f State's recor	ds.	nung requirem	ents, tins date v	an not be used
			•			
e record specifies a delayed effec	tive date, but n	ot an effective	e time, at 12:01	a.m. on the earli	er of: (b) The	90th day after t
rd is filed.						
October 27		2022				
Dated		``	·			
					_	
		a member or a				

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Filing Fee: \$25.00