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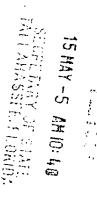
(Requestor's Name)				
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# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Start From Swalph Bakery Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Aimee Dovanch
Name of Person
Start From Suatch Bukery Firm/Company
Firm/Company
10230 GW 277th Sheet
10230 SW 227th Street Address
C. 118
City/State and Zin Code
Cutler bay F2 33170  City/State and Zip Code  info @ Start from Surutchballing. Lon  E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Aimee D Branch at (305) 318 2013  Name of Person  Area Code Daytime Telephone Number
The out of the out
7N 314 6418
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Start From Swatch Bakery  (Name of the Limited Liability Company as it now appears on our records.)  (A Florida Limited Liability Company)		
( <u>Name of the Limited Liability Company as it now appears on &amp;fr records.)</u> (A Florida Limited Liability Company)		
The Articles of Organization for this Limited Liability Company were filed on 4711 9, 2014  Florida document number 4140000 58331.	and assigned	đ
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company here:		
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the a	abbreviation "L.L.C."	—
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
·		<del></del>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
Mutang matress MAT BEATOST OFFICE BOAT		
B. If amending the registered agent and/or registered office address on our records, enter registered agent and/or the new registered office address here:	the name of the	he new
	5	
Name of New Registered Agent:		<del>.</del>
New Registered Office Address:	SS -2 5	A CE.
Enter Florida street address		7.0
	Zip Cocke	****
New Registered Agent's Signature, if changing Registered Agent:	57 G	

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 $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Joshua Hunter	370 Kiver Road East Ogdensburg NY 13669	<b>X</b> Add
		Ogdersburg NY 13669	□ Remove
			□ Change
AMBR	Meagan Hunter	370 River Road East Ogdersburg NY 13669	X Add
		Ogdersburg NY 13669	□ Remove
			□ Change
			☐ Remove
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			🗆 Remove
			Change

amending any other information, enter change(s) here: (Attach additional sheets, if necess	wy.,
	<del></del>
Tective date, if other than the date of filing:	al) ling.) Pursuant to 605.020 ate will not be listed a
neutrient's effective date on the Department of State's fectors.	<del></del> }
e record specifies a delayed effective date, but not an effective time, at 12:01 a.r The 90th day after the record is filed.	n. on the earlier o
ated April 29 2015	AY -5 EWKY HASSE
Dinie Deruch	AN ID
Signature of a member or authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00