L14 0000 91437

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COVER LETTER

TO: Registration Sec Division of Corp			
Lemon City SUBJECT:	Tea Company, LLC		
obbitch	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub	-	
	Moniqe D. Hayes, Esq		
	The second secon	Name of Person	
	Goldstein & McClintock,	LLLP	
	en de comercia de la	Firm/Company	halaman and an ann an
	199 E. Flagler St. #405		
		Address	
	Miami, Florida 33131		
		City/State and Zip Code	
	moniqueh@goldmclaw.con E-mail address; (n to be used for future annual report notifi	cation)
For further information co	ncerning this matter, please ca	·	·
Monique D. Hayes		305 2166366	
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	e 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LEMON CITY TEA COMPANY, L		v as it now apacars on our	records.)			
(A Florida Limited Li	y as it now appears on our ability Company)				
The Articles of Organization for this Limited Lia Florida document number L14000091437	ability Company v	were filed on 6/6/2014		_ and assi	gned	
This amendment is submitted to amend the follo	wing:					
A. If amending name, enter the new name of	the limited liabil	ity company here:				
The new name must be distinguishable and contain the wo	ords "Limited Liabilit	y Company," the designatio	n "LLC" or the abbre	viation "L.L	C."	
Enter new principal offices address, if applica	ble:					
(Principal office address MUST BE A STREET	(ADDRESS)					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	<u>80X)</u>			dadord read of all the top level		
B. If amending the registered agent and/or registered agent and/or the new registered off			ecords, <u>enter th</u>	e name of SECH	of the new	<u>iv</u>
Name of New Registered Agent:	Lauren K. Fernar	ndez		7. T.	<u>ਛ</u> ੂ	ï
New Registered Office Address:	6700 Indian Cree			SE	29	M¢ è
		Enter Florida street		1.00	$\geq n$	1
	Miami	City	, Florida	Di Ande		ž
New Registered Agent's Signature, if changing R	egistered Agent:		<u>.</u>		•	

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 = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Gail Hamilton	15227 SW 169 Lane	Add
		Miami, FL 33187	■ Remove
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Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to Note: If the date inserted in this block does not meet the applicate document's effective date on the Department of State's records.	o date of filing or more than 90 days after	ional) or filing.) Pursuant to 6 is date will not be li	05.0207 (3) sted as the
the record specifies a delayed effective date, but not p) The 90th day after the record is filed.	an effective time, at 12:01	a.m. on the ear	ller of:
Dated August 22, 2017			
Dalinenta			
Signature of a member or author	ized representative of a member		

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Filing Fee: \$25.00