

L14000128683

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

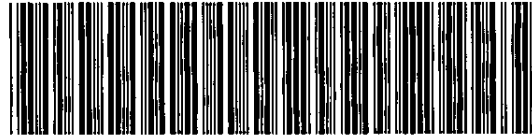
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Pineapple Pattis LLC
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:

Elizabeth Mendez
Name of Person

Firm/Company

Address

2739 S. US Highway 1 Fort Pierce FL 34982
City/State and Zip Code

viennagantiques@live.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elizabeth Mendez at (772) 480 6598
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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TALLAHASSEE, FLORIDA

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

Pineapple Patti's 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 Liability Company were filed on August 18, 2014 and assigned Florida document number L14 000128683.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Elizabeth Mendez

New Registered Office Address:

2739 S. US Highway 1

Enter Florida street address

Fort Pierce

City

Florida

34982

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.

Elizabeth Mendez

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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AMBR	Patricia Brown	2739 S. US Highway 1	<input type="checkbox"/> Add
		Fort Pierce FL 34982	<input checked="" type="checkbox"/> Remove

AMBR	Elizabeth Mendez	2739 S. US Highway 1	<input checked="" type="checkbox"/> Add
		Fort Pierce FL 34982	<input type="checkbox"/> Remove

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			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated August 29, 2014.

Elizabeth Mendez

Signature of a member or authorized representative of a member

Elizabeth Mendez

Typed or printed name of signee

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**ASSIGNMENT OF INTEREST IN A
LIMITED LIABILITY COMPANY**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**THIS ASSIGNMENT OF INTEREST IN A
LIMITED LIABILITY COMPANY, made as of the 29th day of August, 2014,**

by: PATRICIA L. BROWN ("Assignor"), whose mailing address is 2739 S. U.S. Highway 1, Ft. Pierce, FL 34982

to: ELIZABETH MENDEZ, ("Assignee"), whose mailing address is 3401 S. U.S. Highway 1, Ft. Pierce, FL 34982.

WITNESSETH:

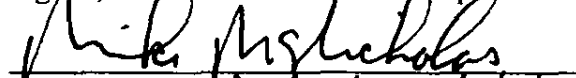
[The terms defined herein are used for singular or plural, as context requires or admits, and include, bind and inure to the benefit of all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of trustees, corporations, companies, and/or partnerships, whether voluntarily by act of the parties or involuntarily by operation of law and the use of any gender shall include all genders.]

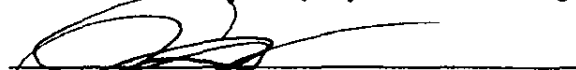
KNOW ALL MEN BY THESE PRESENTS, that for good and valuable consideration, to Assignor in hand paid by Assignee at or before the ensealing and delivery of these presents, the receipt and sufficiency of which are hereby acknowledged, Assignor does hereby grant, bargain, sell assign, transfer and set over unto Assignee all of Assignor's interest in the profits, capital and management rights of PINEAPPLE PATTI'S, LLC a Florida limited liability company.

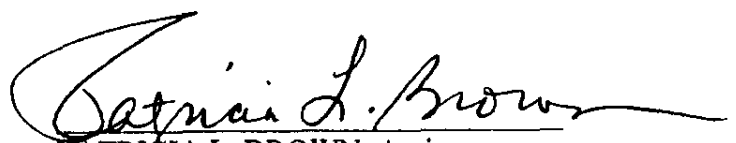
TO HAVE AND TO HOLD the same unto Assignee forever.

IN WITNESS WHEREOF, Assignor has executed these presents the day and year first above written.

Signed, sealed and delivered in the presence of:


(Printed Witness Name) Michael McNicholas


(Printed Witness Name) Shannon McCreary-Coscare


PATRICIA L. BROWN, Assignor

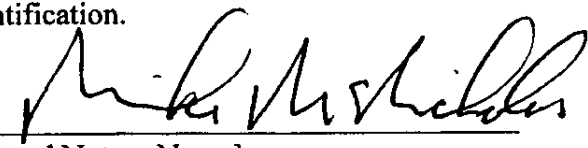
STATE OF FLORIDA
COUNTY OF MARTIN

THE FOREGOING INSTRUMENT, was acknowledged before me this 29 day of August, 2014, by PATRICIA L. BROWN, who is ☒ personally known to me or ☐ has produced a driver's license bearing a photographic likeness as identification.

[Notarial Seal]



Michael J. McNicholas
NOTARY PUBLIC
STATE OF FLORIDA
Comm# EE214807
Expires 8/17/2016


[Printed Notary Name] _____
Notary Public, State of Florida

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TALLAHASSEE, FLORIDA

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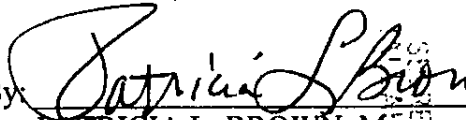
CONSENT OF LIMITED LIABILITY COMPANY

THE UNDERSIGNED, being the Manager of PINEAPPLE PATTI'S, LLC, a Florida limited liability company (the "Company"), hereby consents to the foregoing Assignment of Interest in a limited liability company in favor of Assignee, and certify as follows:

- (a) PINEAPPLE PATTI'S, LLC, is duly registered, active and in good standing under the laws of the State of Florida, and the Articles of Organization are unamended and are in full force and effect.
- (b) Assignor is the sole owner of a 100% interest in the profits of the Company and has the capacity to assign all or any portion thereof;
- (c) Assignor is not in default in Assignor's obligations under the Articles of Organization or Operating Agreement of the Company; and
- (d) To the best of the Company's knowledge, Assignor's interest in the Company is subject to no prior assignment, lien, security interest or other encumbrance.

Executed this 29th day of August, 2014.

**PINEAPPLE PATTI'S, LLC, a Florida
limited liability company**

By: 
PATRICIA L. BROWN, Manager

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