

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESI

CREATIVE DINING, LLC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

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TO:

Registration Section

:-

COVER LETTER

DW	ision of Cor	porations			
SUBJECT:	CREATIVE DINING, LLC				
Sold Ect.		Name of Lim	ited Liability Company		
The enclosed	i Articles of a	Amendment and fec(s) are sub	mitted for filing.		
Please return	all correspon	ndence concerning this matter	to the following:		
		Cheyenne Moseley			
			Name of Person		
		Legalzoom.com, Inc.			
			Firm/Company		
		100 W. Broadway Suite	100		
		<u></u>	Address		
		Glendale, CA 91210			
			City/State and Zip Code		
		marykayflood84@gmail.	com to be used for future annual report notif	ication)	
For further in	nformation co	oncerning this matter, please of		,	
Imelda Vas	squez		323 962-8600 ex		
	Name of	Person	at ()	: Telephone Number	
Enclosed is a	check for th	e following amount:			
□ \$25.00 F	filing Fee	S30.00 Filing Fee & Certificate of Status	第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

CREATIVE DINING, LLC (Name of the Limit	ted Llubility Company as it now appear	rs on our records.)	
	ted Liability Company as it now appear (A Florida Limited Liability Company)		
The Articles of Organization for this Limited L	iability Company were filed on $\frac{10}{10}$	/27/2014	and assigned
Florida document number L14000166678			
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liability company h	ere:	
Better Baked Goods, LLC			
The new name must be distinguishable and end with the	words "Limited Liability Company," the	designation 'LLC' or th	
Euter new principal offices address, if applie	able:	2	
(Principal office address MUST BE A STREE	TADDRESS)	2.5	è mas
			\$ 73 I
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	BOX)	1X1	<u> </u>
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent.	or registered office address or ffice address here: Mary Flood	our records, ente	r the name of the ne
New Registered Office Address:	. 2185 Malibu Lake Circle, #12	35	
	Emer Flor	rida sweet address	
	Naples .	, Florida	34119
	Cin		Zip Code
New Registered Agent's Signature, If changing I	Registered Agent:		
I hereby accept the appointment as registere provisions of all statutes relative to the propacted the obligations of my position as registering filed to merely reflect a change in the company has been notified in writing of this	er and complete performance of stered agent as provided for in Cregistered office address, I herel change:	my duties, and Lun Chapter 605, F.S. O by confirm that the	n familiar with and ir, if this document is limited liability
	If Changing Bellistered Ag	ter Signature or isen.	registeren oseni
	Page 1 of 3		

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

Title	Name	Address	Type of Action
AMBR	Steven Flood	2185 Malibu Lake Cir Apt #1235	12 Add
		Naples, FL 34119	☐ Remove
			☐ Remove
			□ Add
			☐ Remove
		TALLAR ASSET	Remove
		OF SAIE	,e
			☐ Remove
			Remove

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: (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 May 4+4, 2015.
	Mary Flood
	Signature of a member or authorized representative of a member
	Mary Flood
	Typed or printed name of signes

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Filing Fee: \$25.00

2015 HAY 12 A 8: O