## L15 000092841

(Req	uestor's Name)	
(Add	ress)	
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(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
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Office Use Only



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SECRETARY OF STATE
STATE CORPORATION
2022 AUG 22 AM 9: L9

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pita N Bowl 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  $\frac{05/27/2015}{1}$ \_\_\_ and assigned Florida document number <u>L15000092841</u> 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 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: New Registered Office Address: Enter Florida street address \_, Florida \_\_\_

## 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.

City

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>	<u>Name</u>	Address	Type of Action
AMBR	Mahammad Natour	3330 Brussels Ave	<b>∃</b> Add
		Hollywood, F1, 33026	□Remove
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fective date, if other than the da n effective date is listed, the date must be ote: If the date inserted in this block cument's effective date on the Depa	specific and cannot be prio does not meet the applic	r to date of tiling or mo cable statutory filing	(option re than 90 days after fi requirements, this c	ling.) Pursuant to 605.0207
mand manel Carrier distance & Principle 1	ate, but not an effective t	time, at 12:01 a.m. o	n the earlier of: (b)	The 90th day after the
is filed.	2022			
is filed.	2022			
is filed. ted August 18	hospe			
is filed. ted August 18	2022 anature of a member or auth	norized representative of	of a member	

Filing Fee: \$25.00