## 116000045383

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## **COVER LETTER**

Divis	ion of Corp	orations		
	ALL PITA I	BAKERY, LLC		
SUBJECT: _				
The enclosed A	Articles of A	Amendment and fee(s) are sub-	nitted for filing.	
Please return a	all correspor	ndence concerning this matter	to the following:	
		Dana Quinones		
			Name of Person	
		The Grantham Law Firm		
		1860 Forest Hill Blvd., Ste		
		West Palm Beach, FL 334	06	
		dana@kirkgrantham.com	City/State and Zip Code	
For further inf	formation co		to be used for future annual report noti	
Dana Quinon		, , , , , , , , , , , , , , , , , , ,	561 966-9563	AHATA ASA 22 CONTROL TO THE PROPERTY OF THE PR
	Name of	`Person		FISH
Enclosed is a	check for th	e following amount:		10A 10B 58
■ \$25.00 Fil	ling 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)
	MAILI	NG ADDRESS:	STREET/COUR	ER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section '

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALL PITA BAKERY, 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  $\underline{03/04/2016}$ and assigned Florida document number \_\_\_\_\_L16000045383 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 "L.L.C." 6112 Washington Road Enter new principal offices address, if applicable: West Palm Beach, FL 33405 (Principal office address MUST BE A STREET ADDRESS) 6112 Washington Road Enter new mailing address, if applicable: West Palm Beach, FL 33405 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enterthe Tame 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.

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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Filing Fee: \$25.00