## 1/6000133280

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  ertified Copies Certificates of Status  Special Instructions to Filing Officer:		
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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## **COVER LETTER**

Div	ision of Cor	porations		
SUBJECT:	Beanie & B	ellies Cupcakery LLC.		
SUBJECT		Name of Lim	ited Liability Company	
The encloses	Articles of .	Amendment and fee(s) are subi	mitted for filing	
			-	
Please return	all correspoi	ndence concerning this matter	to the following:	
		Lorena Brunson		
			Name of Person	
		Beanic & Bellies Cupcaker	ry LLC.	
			Firm/Company	<del></del>
		3215 S. MacDill Ave. Suit	e D	
			Address	<del></del>
		Tampa FL 33629		
		beaniebellies@yahoo.com	City/State and Zip Code	
		E-mail address: ()	to be used for future annual report notific	cation)
For further in	nformation co	oncerning this matter, please ca	dl:	
Lorena Brur	ison		813 837-4402 at ()	
	Name of	Person	Area Code Daytime	l'elephone Number
Enclosed is a	check for th	e following amount:		
\$25.00 F	îling 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:

TO:

Registration Section

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



Beanie & Bellies Cupcakery 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 Co	ompany were filed on July 5, 2016	and assigned
Florida document number <u>316A00015105</u>	133280	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	··	
(Principal office address MUST BE A STREET ADDR	(ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>	
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr		enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	da
	City	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.

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>	<u>Name</u>	Address	Type of Action	
AMBR	Destinec Brunson	14702 Turtle Creek Circle Apt 102 Lutz FL 33549	■ Add	
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			Add	
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ffective di	ate, if other than date is listed, the dat	n the date of fi	iling:	prior to date of	tiling or more tha	(optior n 90 days after fi	i <b>al)</b> ling.) Pursuant to 60	05.020
Note: If the	e date inserted in the effective date on t	his block does n	not meet the a	pplicable statu	tory filing requ	irements, this o	late will not be li	sted as
		·						
	specifies a del h day after the			t not an eff	ective time,	at 12:01 a.	m. on the ear	lier o
Septe Dated	ember 19		2018					
		<u> </u>	—· <del>(-</del>	<u></u>				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00