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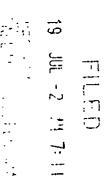
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COVER LETTER

	egistration Sec ivision of Corp			
eunteer		EE'S KWIK CHICK, LLC		
SUBJECT	·	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub	-	
		RENEE C	'RAWFORD	
			Name of Person	
		RUTH AT	ΓΤΑWAY CPA	
			Firm Company	
		16216 NW	ASHLEY SHIVER ROAD	
			Address	
		ALTHA, I	FL 32421	
			City/State and Zip Code	
		<u>darboonstr</u> E-mail address: t	क्षिर mail.com to be used for future annual report notifi	cation)
For further	information co	oncerning this matter, please ca		
RI	ENEE CRAWF	FORD	850 674-2995	
	Name of	Person		Telephone Number
Enclosed is	s a check for th	e following amount:		
\$25.00	Filing 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)
		ING ADDRESS:	STREET/COURIE Registration Section	

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DAR-BEE'S KWIK CHICK, LLC		
(<u>Name of the Limited Liability Cor</u> (A Florida Limit	npany as it now appears on our records.) ed Liability Company)	 _
The Articles of Organization for this Limited Liability Compa	iny were filed on OCTOBER 10, 2016	and assigned
Florida document number L16000187099		
This amendment is submitted to amend the following:	document number L16000187099 mendment is submitted to amend the following: mending name, enter the new name of the limited liability company here: name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." new principal offices address, if applicable: pal office address MUST BE A STREET ADDRESS) new mailing address, if applicable: line address MAY BE A POST OFFICE BOX) amending the registered agent and/or registered office address on our records, enter the name of the new	
A. If amending name, enter the new name of the limited l	ability company here:	
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
 		<u> ب</u>
		= =
B. If amending the registered agent and/or registered registered agent and/or the new registered office address between the second of the seco		the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florida	
 -	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 n:anage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	JUDSON E DARBY	5045 OLD SPANISH TRAIL MARIANNA, FL 32448	■ Add
			☐ Remove
			☐ Change
			Add
			□ Remove
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iote:	ive date, if other (fective date is listed, the If the date inserted fent's effective date	in this block do	es not nicel	t the applicab	date of filing or le statutory fil	more than 90 ing requirem	(optional) days after filing ents, this date) .) Pursuant to 60 will not be lis	5.0201 ted as
	cord specifies a 90th day after			e, but not	an effective	time, at 1	2:01 a.m.	on the earl	ier o
ated	JUNE	21	,	2019					
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	Ledie	2 L	107/						
	L'edie	Signati	Tic of a men	nhar or authori	ced representati	ve of a membe	ſ		

Page 3 of 3

Filing Fee: \$25.00