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2017 APR 26 PH 1:44
SECRETARY OF STATE

K. SALY APR 28 2017

COVER LETTER

	Registration S Division of Co			
OLID LD C	Chana's He	eros, LLC		
SUBJEC	Т:	Name of Lim	nited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	urn all correspo	ondence concerning this matter	to the following:	
		Zipora Natanov		
		, ,	Name of Person	·
		Chana's Heros, LLC		
			Firm/Company	
		12276 San Jose Blvd, #709)	
			Address	
		Jacksonville, Florida 3222	3	
		Lather (10) and I am	City/State and Zip Code	·
		bethwu61@gmail.com	to be used for future annual report notif	instina
For furthe	er information o	concerning this matter, please co	•	icanon)
Zipora Na		, re-	904 434-4335	
	Name o	of Person	Area Code Daytime	Telephone Number
Enclosed	is a check for t	he following amount:		
\$25. 0	0 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)

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

FILED
2017 APR 26 PM 1:44

SECRETARY OF STATE
FALLAHASSEE, FLORIDA

Chana's Heros, 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	arch 20, 2017	and assigned
Florida document number L17000063521			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company h	ere:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company." the o	lesignation "LLC"	or the abbreviation "L.L.C."
	,		
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 off registered agent and/or the new registered office address here Name of New Registered Agent:		our records,	enter the name of the new
New Registered Office Address:			
New Registered Office Address.	Enter Flo	rida street address	
·		, Floi	rida Zip Code
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of rovided for in (my duties, and Chapter 605, F	I I am familiar with and .S. Or, if this document is
	ging Registered A	zent, Signature of	New Registered Agent

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Sammi Beyer Morali	10435 Midtown Parkway	■ Add
		Jacksonville, FL 32246	□ Remove
			☐ Change
			Add
			□ Remove
			Classe Acc Add
			Add 26 P. F.
			□ Add
		<u> </u>	□ Remove
		 	□ Change
		_	Add
			□ Remove
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	-		Add
			Remove

☐ Change

If amending any other information	i, enter change(s) here: (Attach additional sheets, if necessary.)	
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Effective date if other than the dat	April 25, 2017	
If an effective date is listed, the date must be something. If the date inserted in this block document's effective date on the Department.	e of filing:	05.0207 (3)(b) sted as the
ne record specifies a delayed eff The 90th day after the record	fective date, but not an effective time, at 12:01 a.m. on the ear is filed.	lier of:
April 25	2017	
Sion	Ature of a member or authorized representative of a member	
ngi.	parate of a member of acquisitized representative of a member	

Page 3 of 3

Filing Fee: \$25.00