11000112453

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COVER LETTER

TO:

Registration Section **Division of Corporations**

478 tax 88*4 ver	Panchicken LLC				
SUBJECT:	Name of Limi	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	Tanice Pantry				
		Name of Person			
	P	anchicken LLC			
		Firm/Company			
11150 Okeechobee Blvd Suite H					
	David De	Address			
	Koyai i a	Royal Palm Beach,Fl 33411			
	City/State and Zip Code pantrytanice@gmail.com				
	E-mail address: (to be used for future annu	al report notifica	tion)	
For further information	concerning this matter, please or	all:			
Tanice Pantry		at ()	225-5962		
Name	of Person	Area Code	Daytime Te	elephone Number	
Enclosed is a check for	the following amount:				
■ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fed Certified Copy (additional copy is a		□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Regis	LING ADDRESS: tration Section ion of Corporations	Regist	ET/COURIER ration Section on of Corporation		
P.O. 1	Box 6327 hassee, FL 32314	Cliftor	Building Executive Cente		

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Panchicken LLC			
(Name of the Limite	St Liability Company as A Florida Limited Liabili	nt now appears on our records.) y Company)	······································
The Articles of Organization for this Limited Li		filed on 5/22/17	and assigned
lorida document number 1.17000112453			
his amendment is submitted to amend the follo	owing:		
A. If amending name, <u>enter the new name of</u>	the limited liability of	company here:	
he new name must be distinguishable and contain the w-	ords "Limited Liability Co	mpany," the designation "E.I.C" or the a	hbreviation "L.L.C."
Enter new principal offices address, if applica	able:		
<u>Principal office address MUST BE A STREE</u>	T ADDRESS)		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE I	<u>BOX)</u>		
3. If amending the registered agent and/ registered agent and/or the new registered of		address on our records, <u>enter</u>	the name of the new
Name of New Registered Agent:	TANIC	e Pantry	
New Registered Office Address:	11150 DK	ELHOBEE BLVD. Enter Florida street address	Sunte H. 3
	ROYAL PAI	M BEACH, Florida_	33411 · N

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
MGR	Tanice Pantry	2599 SW Edgarce St. Port Lucie, Fl 34953	Add
			□ Remove
			☐ Change
MGR	Shirley Bryce	136 Granada St. Royal Palm Beach,Fl 33411	□ Add
			■ Remove
			☐ Change
			D Add 20
			Add 2019 SEP 2
			Change
			PP 12:17
			☐ Remove
			□ Change
	<u> </u>		
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Note	tive date, if other than the date of filing: 9/25/19 (optional) flective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 6 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liment's effective date on the Department of State's records.	05.0207 (3 Kb) sted as the
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear e 90th day after the record is filed.	lier of:
Date	9/25/19 Antra	
	Signature & member or authorized representative of a member	

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Filing Fee: \$25.00