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W. HARRIS

### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Soul Food Addiction & Sweets LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Debra Robinson
Soul Fax Addiction & Sweets LC
5998 NW Lake Seffery Rd.
City/State and Zip Code  da rubinson 152@gmail: Com  E-mail address: (to be used for futble annual report notification)
For further information concerning this matter, please call:
Deby C Robinson at 384 U97-3416  Name of Person at 384 Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$55.00 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 **ARTICLES OF ORGANIZATION**

Soul Food Addiction (Name of the Limited Liability Company)	4 SNLCTS LLC  ny as It now appears on our records.)  ability Company)
	)
The Articles of Organization for this Limited Liability Company	
Florida document number <u>800300275878</u> U	1 1000136 363
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:
	TA 6
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
Enter new mailing address, if applicable:	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
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

MGR = Mar AMBR = Aut	nager horized Member		
Title	Name	Address	Type of Action
Pres	Shedequia Bobinson	3935 SECR 245	DAdd
	V	3935 SECR 245 Lake CHY, FL 32025	Remove
			Change
Secretary	Shedequia Hobinson	3925 SE CR 245 Late City, FL 32025	<b>ID</b> Add
J	<i>U</i> -	Lake City, FL 32025	□ Remove
			Change
			Add
			□ Remove
			Change
			D Add
			Remove
			Change
			Adde
		) (// (//	C□ Change
			Remove
			☐ Change

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

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	Shedequia Fobinsin 15 being Removed
_	
_	as President and Listed as Secretary for
-	business purpose Not a co owner of
-	
-	Soul Food Addiction & Sweets U.C.
-	
-	
-	
-	
•	
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	ive date, if other than the date of filing: (optional) ective 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 605.0
rte:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ent's effective date on the Department of State's records.
te: cun	ent's effective date on the Department of State's records.
te: cun	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ent's effective date on the Department of State's records.  cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.
re The	ent's effective date on the Department of State's records.  cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier
re re	ent's effective date on the Department of State's records.  cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier
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re re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.  Signature of a member or authorized representative of a member  SEBLA A. ROBINSON
re:	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.  Signature of a member or authorized representative of a member  Typed or printed name of signee
re re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.  Signature of a member or authorized representative of a member  Typed or printed name of signee

Filing Fee: \$25.00