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COVER LETTER

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SUBJECT:	Le	Moment	Patissevie	UC
.,op.,		Name of I	limited Liability Company	
The enclosed Articles of	f Amendm	ent and fee(s) are:	submitted for filing.	
Please return all corresp	ondence co	oncerning this mat	ter to the following:	
	Name of Limited Liability Company Articles of Amendment and fee(s) are submitted for filing. The Articles of Amendment and fee(s) are submitted for filing. Address Le Howent Partisserie LLC Firm Company 16309 Bridgecrossing Dr. Lishkia FL. Address Lishkia / FL 33547 City/State and Zip Code Lemoment partisserie @ gracil. com E-mail address: (to be used for future annual report notification) Information concerning this matter, please call: 1 Certificate of Status 1 S55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) 1 Signst Address: (gistration Section Division of Corporations) 2 Days 6327 Street Address: (Registration Section Division of Corporations) The Centre of Tallahassee			
			Name of Person	
		L	e Moment	Parisserie LLC
	16		yecrossing Dr	
			Address	
		して	hia /FL 7	33547
			City/State and Zip Co	de
	<u>lev</u>	NoMent pat E-mail addres	s: (to be used for future ann	ual report notification)
For further information	concerning	this matter, pleas	e call:	·
V	_	_		us u sutak
			at (<u>&13</u>) Area Code	Daytime Telephone Number
Enclosed is a check for t	he followi	ng aniount:		
🗶 \$25.00 Filing Fee			Certified Copy	Certificate of Status & Certified Copy
Mailing Addre				
_		ons		
P.O. Box 63.	27		The C	Centre of Tallahassee
Tallahassee.	FL 3231	4		N. Monroe Street, Suite 810 hassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	parisserie uc	<u></u> .	
(<u>Name of the Limited 1</u> (A F	iability Company as it now a forida Limited Liability Comp	ppears on our records.) any)	
ne Articles of Organization for this Limited Liabil	lity Company were filed o	Dec. 28, 2017	and assigned
orida document numberL17000 2 6 3 6 0 7			-
is amendment is submitted to amend the following	ig:		
If amending name, enter the new name of the	e limited liability compa	ny here:	
e new name must be distinguishable and contain the words	"Limited Liability Company."	the designation "LLC" or the ab	previation "L.L.C."
ter new principal offices address, if applicable	e:		
rincipal office address MUST BE A STREET A	DDRESS)		
nter new mailing address, if applicable:			
ailing address MAY BE A POST OFFICE BO.	<u></u>		
If amending the registered agent and/or regis	tered office address on o	our records, enter the name	e of the new registe
ent and/or the new registered office address he	<u>ere</u> :		
Name of New Descriptored Assets			
Name of New Registered Agent:			
New Registered Office Address:			
	Ente	r 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 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	Yeojin Jung	16209 Bridgecrossing Dr. Lithia, FL. 23547	 ∑ i∧dd
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n effect <u>te:</u> If	ive date is listed, the date inserte	er than the da , the date must be ed in this block ate on the Depa	specific and e does not me	cannot be prior eet the applic	able statutory	g or more than so filing require	(option 00 days after fi ements, this c	ling.) Pursuant i	to 605,020 e listed a
cord s s filed	pecities a delag	yed effective da	ite, but not a	n effective ti	ime, at 12:01	a.m. on the ea	rlier of: (b)	The 90th day	after the
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