118000019342

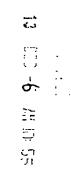
(Red	questor's Name)	
(Add	dress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number))
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	_

Office Use Only



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O SIMMONS UEC 0.7 2018



November 21, 2018

ASHLEY COATES 112 DAKOTA AVE GROVELAND, FL 34736

SUBJECT: SPICED BY CINNAMON LLC

Ref. Number: L18000019342

We have received your document for SPICED BY CINNAMON LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 718A00023929

Octavia L Simmons Regulatory Specialist III

www.sunbiz.org

COVER LETTER

то:	Registration Se Division of Cor			
		Cinnamon LLC		
SUBJE	CT:	Name of Lim	ited Liability Company	
The enc	closed Articles of .	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Ashley Coates		
		Spiced By Cinnamon LLC	Name of Person	
		112 Dakota Ave	Firm/Company	
		Groveland, FL 34736	Address	
		j.cin8@yahoo.com	City/State and Zip Code	
		E-mail address; (to be used for future annual report noti	fication)
For furt	ther information c	oncerning this matter, please co	all:	
Ashley	Coates		850 879-2750 at () Area Code Daytim	e Telephone Number
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclose	ed is a check for th	ne following amount:		
≘ \$25	5.00 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)

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

Spiced By Cinnamon LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Examinty Company)

The Articles of Organization for this Limited Liah Florida document number 1.18000019342		were filed on	ny 12, 1970	and assigned
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	<u>.</u> 60			
				8
The new manie must be distinguishable and contain the wor	idai,I botimi.I" ab	lity Communy," the desig	gnation "LLC" or the abl	ireviation "L.E.C."
Enter new principal offices address, if applicable:		2121 S Hawassee	Road, Suite 106	6 :
(Principal office address MUST BE A STREE)		Orlando, FL 32835		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>ON)</u>	112 Dakota Ave Groveland, FL 347	36	:
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:		<u>, , , , , , , , , , , , , , , , , , , </u>	ur records, <u>enter</u>	the name of the new
New Registered Office Address:	2121 S Hiawas	see Road, Suite 106		
<u> 1755 77. 185 grands viscouris anna (a. cualdada)</u>		Enter Florida	street address	<u> </u>
	(Orlando	. Florida	32835
•		Cirr	. ,	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 filled 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, Squarture of New Registered Agent

Page 1 of 3

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

Title	Name	Address	Type of Action
rnie	Cassandra Johnson	914 Apache Street	
AMBR			
		Tallahassee, FL 32301	
			Remove
			☐ Change
	Kendrell Coates	6324 Raleigh Street	
AMBR	Retailed Contes	Ç	□ Add
		Orlando, FL 32835	 _
			■ Remove
			Change
	Ashley Coates	112 Dakota Ave	
MGR	•		
		Groveland, FL 34736	
			Remove
	Ashley Coates	112 Dakota Ave	<u></u>
AMBR	Mainey Courte		
		Groveland, FL 34736	1
			Remove
			Change
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	he date of filing:			(optional)
Effective date, if other than the free free free free free free free fr	nust be specific and canno	t be prior to date of	iling or more than 90 da	ys after filing.) Pursuant to 605.0 us, this date will not be listed
Note: If the date inserted in the document's effective date on the	DIOCK DOCS HOURINGS III	ic apprication of	tory ming requiremen	
he record specifies a dela The 90th day after the i	yed effective date, record is filed.	but not an eff	ective time, at 12	1:01 a.m. on the earlie
October 25	20	18		
Dated	· -			
[/]		$\overline{}$		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00