

L18 0000 31354

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

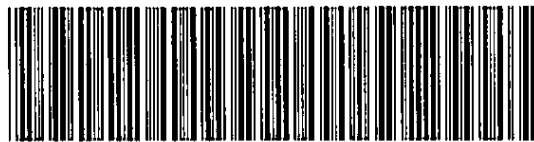
(Business Entity Name)

(Document Number)

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2021 JUL 15 PM 12:42
TALLAHASSEE, FL

D BRUCE
AUG 05 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: What The Fork LLC (DBA Brady's BBQ)
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:

Peter Ingrasselino
Name of Person

Firm/Company

8 Amicolola Drive
Address

Highland Lakes NJ 07422
City/State and Zip Code

pete1031@gmail.com
Email address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Peter Ingrasselino at (201) 286-3900
Name of Person Area Code Daytime Telephone Number

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RECEIVED
TALLAHASSEE, FL

Enclosed is a check for the following amount:

- \$25.00 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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

What the Forde LLC (DBA Brady's BBQ)
(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 2/5/2018 and assigned Florida document number L180000031354

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." 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)

2021 JUL 15 PM 12:42
SECRET
TALLAHASSEE OFFICE

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

PETER INGRASSELINO

New Registered Office Address:

340 MAIN STREET
Enter Florida street address

Safety Harbor, Florida 34695
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.

Peter Ingrasselino
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> | <u>Address</u> | <u>Type of Action</u> |
|--------------|--------------------|-------------------|--|
| MGR | Peter Ingrasselino | 8 Amicalola Drive | <input checked="" type="checkbox"/> Add |
| | | Highland Lakes | <input type="checkbox"/> Remove |
| | | NS 07422 | <input type="checkbox"/> Change |
| MGR | Nicole Zavodny | 340 Main St. | <input type="checkbox"/> Add |
| | | Safety Harbor | <input checked="" type="checkbox"/> Remove |
| | | FL 34695 | <input type="checkbox"/> Change |

REGISTRATION UNIT
TALLAHASSEE, FL

2021 JUL 15 PM 12:12

END

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

2021 JUL 19 PM 12:12
TALAMON, PETER

E. Effective date, if other than the date of filing: 7/7/2021 (optional)

(If an effective 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 7/7/ 2021

Peter Talamon
Signature of a member or authorized representative of a member

Peter Talamon
Typed or printed name of signer