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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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2022 JUNIO AM 6:31 SECRETATION SEC EN

A. BUTLER AUG 2 6 2022

COVER LETTER

Division of Cor			
Fresh on th	ie Square LLC		
SUBJECT:	Name of 1 in	nted I subthly Company	- · · ·
The enclosed Articles of	Amendment and feets) are sub-	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Farhad Karimipour		
		Name of Person	
	Fresh on the Square LLC		
		Firm Company	
	PO Box 1227		
		Address	_
	Wildwood, F1, 34785		
		City State and Zip Code	
	mandira freshmadegroup.co E-mail address (m to be used for future annual report notific	cation)
For further information e	oncerning this matter, please c	all:	
Farhad Karimirpour		407 256-5558	
Name o	d Person	al ()	Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy tadditional copy is enclosed:	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy tadditional copy is enclosed)
Mailing Addres		Street Address:	
Registration 5	Section	Registration Sect	100

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FileD

Fresh on the Square LLC	2022 JUN 10 AM 6:31
Fresh on the Square ELC (Name of the Limited Liability Company as it now appears on o (A Florida Limited Liability Company)	TALLAHASSEE, E
The Articles of Organization for this Limited Liability Company were filed on $\frac{0.02020-20}{200000000000000000000000000000$	and assigned
Florida document number 1.18000045296	
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 "I imited I jability Company," the designa	tion "LLC" or the abbreviation "LLLC"
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)	
B. If amending the registered agent and/or registered office address on our record agent and/or the new registered office address here:	s, <u>enter the name of the new registere</u>
Name of New Registered Agent:	
New Registered Office Address: Enter Florida str.	eet address
	. Florida
	Florida

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, it 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Joseph Nisbett	734 Rugby Street	
		Orlando, FL 32804	
			ClChange
MGR	Joe Nisbett	734 Rugby Street	
		Orlando, FL 32804	
			IChange
MGR	Farhad Karimipour	734 Rugby Street	=Add
		Orlando, F1, 32804	JRemove
			[]Change
MGR	Fred Karimipour	734 Rugby Street	
		Orlando, FL 32804	
			TChange
MGR	William Kearns	734 Rugby Street	= Add
	Orlando, Ft. 32804	URemove	
			,TIChange
MGR	Bill Kearns	734 Rugby Street	
		Orlando, F1 32804	■Remove
			□Change

ective date, if other than the date of filing:	Amending legal names of	managers on corporation.	
ective date, if other than the date of filing:			
ective date, if other than the date of filing: (optional) (optio	*		
ective date, if other than the date of filing: (optional) (optio			
ective date. if other than the date of filing: (optimal) (optimal) (effective date is listed, the date must be specific and cannot be proot to date of filing or more than 90 day after filing.) Pursuant to 505,0207 or (in the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a nament's effective date on the Department of State's records. (cond 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 stifted. (Signature of a member or authorized representative of a member.)			
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	Fachad Karimipour		

Filing Fee: \$25.00