Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)962-3889

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FALLAHASSEE, FLORIDA

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Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GOJITNEY, LLC

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JUN 03 2021

A. LUNT

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GOJITNEY, LLC		_
(Name of the Limited Liability Con (A Florida Limit	npany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compa Florida document number L18000057532	ony were filed on <u>03/05/2018</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	lability company here:	
Sauce Plus LLC		
The new name must be distinguishable and contain the words "Limited Li	iability Company," the designation "ELC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS		2021 FAIL
		JUH -2 A
Enter new mailing address, if applicable:		T S
(Mailing address MAY BE A POST OFFICE BOX)		FL GRIB
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	d office address on our records, <u>et</u> <u>here</u> :	nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florid	la
	City	Zip Code
Changing Periotagned An	•	

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

_ Change

MGR = N AMBR = A	Annager Authorized Member		
Title	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remov c
			☐ Change
			□ Add
			☐ Remove
			2021 JUN -2 MM 5: 47
 _			☐ Add
		□ Change	
		D Add	
		□ Remove	
			☐ Change

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Signature of a member or authorized representative of a member

Typed or printed name of signee

Marcelle Butler

Filing Fee: \$25.00