L18000089018

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Chuty Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
, and the second

Office Use Only



800330853928

06/24/19--01023--0.2 **35.00

R WHITE
JUL 0 5 2019



COVER LETTER

SI	JBJECT:	SUPER KNIGHTS FA	AMILY FUN CENTER LLC			
30	, <u>.</u>	Name of Limited Liability Company				
Th	ne enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Ple	ease return all correspor	ndence concerning this matter	to the following:			
			Sonia Becerra			
			Name of Person			
			Swyft Filings, LLC			
			Firm/Company			
		5	15 Post Oak Blvd. #300			
			Address			
		1	Houston, Texas 77027			
			City/State and Zip Code			
			filings@swyftfilings.com			
		E-mail address: (to be used for future annual report notifi-	cation)		
Fo	r further information co	ncerning this matter, please ca	all:			
	Sonia Be	ecerra	at (877) 777-045	60		
	Name of	Person	at (877) 777-045 Area Code Daytime	Telephone Number		
En	closed is a check for the	e following amount:				
X	\$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:

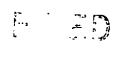
TO:

Registration Section Division of Corporations

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**



2019 JUH 24 PH I2: 21 SUPER KNIGHTS FAMILY FUN CENTER LLC

(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	04/09/2018	_ and assigned
Florida document number	L18000089018			
This amendment is submitted				
A. If amending name, enter	r the new name of the limited liab	ility company here:		
	Savory Treats Vending			
The new name must be distinguish	able and contain the words "Limited Liabit	ity Company," the designa	tion "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices	address, if applicable:			
(Principal office address MU	JST BE A STREET ADDRESS)			···
				 _
Enter new mailing address,	if applicable:			
(Mailing address MAY BE A	A POST OFFICE BOX)			·
~ ~	tered agent and/or registered of new registered office address here		records, enter th	e name of the new
		-		
Name of New Regis	stered Agent:			
New Registered Off	Taa Addrawa			
ivew Registered Off	nee Address.	Emer Florida su	eet address	
			Florida	
		City		Zip Code
New Registered Agent's Signa	ature, if changing Registered Agent:			
provisions of all statutes re accept the obligations of m	ment as registered agent and agre lative to the proper and complete y position as registered agent as p t a change in the registered office in writing of this change.	performance of my d provided for in Chapt	luties, and I am fan er 605, F.S. Or, if	niliar with and this document is

If Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Kareena Persad	7132 Humber Cir Wesley	<u>Yopel</u> A dd
		FL, 33545	Remove
			Change
			
			Remove
			Change
		<u> </u>	
			☐ Remove
			□ Change
			Add
			Remove
			Change
			🗖 Add
		 	Remove
			☐ Change
			Add
			Remove
			🗆 Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<u></u>
E. Effective date, if other than the date of filing:
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 06 /14/2019 2019
Dated 06 /14/2019 2019 Decete Sixle Signature of a member or authorized representative of a member
Dereck Singh. Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00