10/6/22, 12:51 PM

Division of Corporations

Florida Department of State District of Corporations Electronic Fifting Opver-Sheer

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:					
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From:					****
		: EXPRESS CORPORA : I20000000146	TE FILING S	SEKATCE I	INC.
İ	Phone	: (305)444-4994			
	Fax Number	: (305)328-4774			
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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

From: Yanet Avila

BOUTIQUE OF SWEETS		
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our record Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Compan	y were filed on 04/19/2018	and assigned
Florida document number L18000099136		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
BOUTIQUE OF SWEETS LLC		
The new name must be distinguishable and contain the words "Limited Lial	oility Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
		<u> </u>
Enter new mailing address, if applicable:		50
(Mailing address MAY BE A POST OFFICE BOX)		SS O Y
		-
B. If amending the registered agent and/or registered office agent and/or the new registered office address berg:	address on our records, enter	
Name of New Registered Agent:		
New Registered Office Address:		<u> </u>
	Enter Florida street addres	ii .
	'	orida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

To:

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 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

Page: 4-of 5

<u>Title</u>	Name	Address	Type of Action
AMBR	YASIED WAGNER	12377 SOUTH CLEVELAND AVENUE #9	□Add
		FT. MYERS, FL 33907	
		FT. MYERS, FL 33907	= Change
AMBR YA	YAINELIS WAGNER	12377 SOUTH CLEVELAND AVENUE #9	
		FT. MYERS, FL 33907	□ Remove
			Change
			□ Add
			□Remove
			Change
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Effecti	ve date, if other than the date of filing: (optional) ctive 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 (
Note:	ctive 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the notive date on the Department of State's records.
aocame	in a control of the population of participation of the control of
he record ord is file	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 xl.
Dated_	· · · · · · · · · · · · · · · · · · ·
	Signature of a member or authorized representative of a member
	YASIED WAGNER
	Typed or printed name of signee