## 118000112527

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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## **COVER LETTER**

TO: Registration S Division of Co				
Pinch of S	Salt, LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Jennifer Rodriguez			
		Name of Person	· · · · · · · · · · · · · · · · · · ·	
	Pinch of Salt, LLC			
		Firm/Company	- <del> </del>	
	1410 N. 19th Avenue			
		Address		
	Pensacola, FL 32503			
		City/State and Zip Code		
	jenrodriguez13@gmail.con			
	E-mail address: (	to be used for future annual report not	rification)	
For further information	concerning this matter, please c	all:		
Jennifer Rodriguez		850 516-8562		
Name	of Person	Area Code Daytir	ne Telephone Number	
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 Addr		Street Address:	ection	
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 63	27	The Centre of	Tallahassee	
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

Pinch of Salt, 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 05/04/2018 and assigne Florida document number \_\_\_\_\_\_118000112527 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 "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 1410 N. 19th Avenue Enter new mailing address, if applicable: Pensacola, FL 32503 (Mailing address MAY BE A POST OFFICE BOX) 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: Jeffrey J. Heddy, LLC Name of New Registered Agent: 6202 North 9th Avenue New Registered Office Address: Enter Florida street address \_\_. Florida \frac{32504}{Zip Code} Pensacola

## 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.

City

red 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>	Address	Type of Action
AMBR	Manning, Kiley	3103 E. Moreno Street	□Add
		Pensacola, FL 32503	■Remove
			□Change
AMBR	1BR Manning, William	3103 E. Moreno Street	
		Pensacola, FL 32503	■Remove
			Change
			□Add
			□Remove
		<del></del>	□Change
			□ Add
		<del></del>	□Remove
			Change
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			☐ Change

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ffective date, if other than the an effective date is listed, the date made in this locument's effective date on the	ie date of filing: ust be specific and can block does not meet	the applicable s	e of filing or more the tatutory filing req	(optional an 90 days after filin uirements, this dat	g.) Pursuant to 605.0207 i
record specifies a delayed effect I is filed.	ive date, but not an e	ffective time, a	t 12:01 a.m. on th	e carlier of: (b) T	he 90th day after the
December 23	20	)19			
Dunde	Rodriga		representative of a	nomber	
7/ 11	Signature of a mem				

. . . .

Filing Fee: \$25.00