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To:

Division of Corporations

Fax Number : (850)617-6383

To: 18506176383

From:

Account Name : FAEHNER PLLC Account Number : I20170000081 Phone : (727)306-0202 : (727)474-9949 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COUNTRYPET NATURALS, LLC

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Help



Fax: 7274749949

COVER LETTER

TO: Registration S Division of Co			
~	et Naturals LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Michael J Fachner		
		Name of Person	
	Fachner PLLC		
Firm/Company			
301 Woodlands Pkwy, Suite 10			
		Address	
	Oldsmar, FL 34677		
		City/State and Zip Code	
	filings@faehner.com	to be used for future annual report noti	fication)
For further information	concerning this matter, please c		
Michael J. Faehner		727 306-0201 at ()	
Name	of Person	Area Code Daytim	te Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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:	ation
Registration Section		Registration Se	

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

8/18/2022 16:20 44 EDT ...

To: 18506176383

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From: Faehner PLLC

Fax: 7274749949

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CountryPet Naturals, LLC		
(Name of the Limite	d Liability Company as it now appears on ou A Florida Limited Liability Company)	r records.)
The Articles of Organization for this Limited Lia		8 and assigned
Florida document number L18000182820		
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
Hungry Quinn LLC		
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designati	on "LLC" or the abbreviation "L.L C."
Enter new principal offices address, if applica	able:	
(Principal office address MUST BE A STREET	T ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u></u>	
	<u></u>	
B. If amending the registered agent and/or reagent and/or the new registered office address		s, enter the name of the new registered
Name of New Registered Agent:		
Traile of thew Registered Agent.		
New Registered Office Address:	New Registered Office Address: Enter Florida street address	
	Enter Piorita Sire	or mem 622
	City	, Florida
	City	ny core

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.

8/18/2022 16:20:44 EDT

To; 18506176383

Page: 5/6

From: Faehner PLLC

Fex: 7274749949

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
			□Remove
			□ Change
			□Add
			□Remove
			Change
			□Add
			Remove
			Change
			□∧dd
			□Remove
		 	Change
			□Remove
			□Add
			Changa

Fax: 7274749949

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) _ (optional) E. Effective date, if other than the date of filing: (If an effective 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 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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. Signature of a member or authorized representative of a member