Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850) 517-6383

From:

Account Number : 120010000062

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# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **IKE'S ICE LLC**

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EXAMINER

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## **COVER LETTER**

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SUBJEC	1:		Name of Limi	ted Liability Company	· · · · · · · · · · · · · · · · · · ·				
			nendment and fee(s) are subt						
Please ret	tum all co	orrespond	ence concerning this matter	to the following:					
			Cheyenne Moseley						
			•••••••••••••••••••••••••••••••••••••••	Name of Person					
			Legalzoom.com, Inc.						
				Firm/Company		<u></u>			
			101 N. Brand Blvd., 11t	h Floor	_				
				Address	••				
			Glendale, CA 91203						
			23.59 1 3 3 1	City/State and Zip Code			::	20	
			315ikeluv@gmail.com L-mail address: (	to be used for future annual re	port notification)	<del></del>		<b>3</b>	- 1
For furth	er inform	nation con	cerning this matter, please co	all;			15 K	. Y	
Cheyen	ne Mose	eley		800 773	-0888 ext. 9724		H H H H	ω <b>~</b>	; []:
		Name of P	erson	Area Code	Daytine Telephor	ie Numbar	Si/si:	2018 NOV 13 AM 11: 29	
Enclosed	lis a chec	ck for the	following amount:				75	9	
□ \$25.0	00 Filing	Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy radditional copy is enclo		\$60,00 Fil Certificat Certified (additional	e of Stau Copy		

#### MAILING ADDRESS:

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

(Name of the Limited Liability Company as it now appears on our (A Florida Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability Company were filed on 09/19/201	8 and assigned
Florida document number 1.18000223070	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
Ike's Ice Cream LLC	
The new name must be distinguishable and end with the words "Limited Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	20 <b>76</b>
Enter new mailing address, if applicable:	13
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
muting unit ess surver ment even very essent,	
B. If amending the registered agent and/or registered office address on our r	ecords, enter the name of the new
registered agent and/or the new registered office address here:	
<del></del>	
Name of New Registered Agent:	
New Registered Office Address:	
Fixer Florida stree	r address
	, Florida
City	Zip Cosle

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.

H Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	lanager authorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
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			Remove
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			FLORIDA Add
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			☐ Remove

<ol> <li>If amending any other information, enter change(s) here: (Attach additional</li> </ol>	sheets, if necessary.)
	***************************************
The effective date must be specific, cannot be prior to date of filed date and cannot be in the date this document is filed by the Florida Department of State)	ore than 90 days after
Dated 11 - 06 , 2018.	
Tree DUFFE	
Signature of a member or authorized representative of a	member
Issae Duffy	

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Filing Fee: \$25.00