## 1190000 24655

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

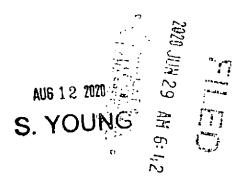
Office Use Only



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## **COVER LETTER**

	ration Section n of Corporations		
SUBJECT:	Bloss Megt Mar	-ket 110	
SUBJECT:		Limited Liability Company	<del>-</del>
The enclosed Ar	ticles of Amendment and fee(s) are s	submitted for filing.	
Please return all	correspondence concerning this matt	ter to the following:	
	Arthur Hu	Name of Person	
	Huggins L	Firm/Company	<del></del>
	_435 S. Ric	Igeneral Ave Ste. 1	17
	Daytong P	Seach 171 32114 City/State and Zip Code	
	E-mail addres	s: (to be used for future annual report notificat	ion)
For further infor	mation concerning this matter, please	e call:	
	Name of Person	at ( <u>844</u> ) <u>484-44</u> Area Code Daytime Te	67 dephone Number
Enclosed is a che	eck for the following amount:		
€ \$25.00 Filin	g Fee \$30.00 Filing Fee & Certificate of Status		S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	g Address: tration Section	Street Address: Registration Section	on

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bless Meat	Market 1			الدين و الدين و
( <u>Name of the Limite</u>	ed Liability Compar A Florida Limited L	y as it now appears on our recor iability Company)	<u>ds.</u> )	west water
The Articles of Organization for this Limited Li	ability Company	were filed on <u>01 23 20</u>	and assigned	ţ.,
Florida document number 49000246	<u>55</u> .	. ,	. 1,2	
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liabi	lity company here:		
The new name must be distinguishable and contain the w	ords "Limited Liabili	ty Company," the designation "LL	C" or the abbreviation "L.L.C."	-
Enter new principal offices address, if applications	able:			_
(Principal office address MUST BE A STREE	T ADDRESS)			-
				-
Enter new mailing address, if applicable:				_
(Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>			_
				-
B. If amending the registered agent and/or ragent and/or the new registered office addres		ddress on our records, <u>ente</u>	r the name of the new registe	<u>ered</u>
Name of New Registered Agent:	Wayne	Soltay		_
New Registered Office Address:	1108 Derl	Shire Road Enter Florida street addre	ess	_
	Daytona.	Beach	ess Florida <u>38 H 7</u> Zip Code	_
New Registered Agent's Signature, if changing I				
				-1

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.

f Changing Registered 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 **Address** Type of Action Title Name Nishaun Brown 1108 Derbyshire Rd **™**Remove \_ DChange MGR WAYNE SOLTAN 1108 DERBYShire RD □Remove □Change Remove \_ □Change □Add \_ Change  $\square$ Add □Remove □Change \_\_\_\_ 🗆 Add \_ □Remove

\_\_\_ □ Change

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an effectiv <u>ote:</u> If th	late, if other than the date of filing:	605.0207 ( listed as t
record sp is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a	ifter the
ated <u>C</u>	N. Brown Signature of a member or authorized representative of a member	
	N Rasa	
	$M_{i}$ $H_{i}$	
	Signature of a member or authorized representative of a member	-

Filing Fee: \$25.00