L 190000 37113

(Re	questor's Name)	-
(Add	dress)	
(Ad	dress)	
(Cit	y/Statě/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	-
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MAR 2 7 2019 S. YOUNG

COVER LETTER

то:	Registration S Division of Co			
elib ita		501-BAMMA'S SNACK SHA	CK, LLC.	
SUBJECT: Name of Limited Liability Company				
The enc	losed Articles of	`Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all corresp	ondence concerning this matter	to the following:	
		PEGGY CARTER		
		CARTER 501 -BAMMA;	Name of Person S SNCK SHACK, LLC.	
		660 N.W. 20 AVE	Firm/Company	
		POMPANO EBACH, FLO	Address DRIDS.33060	
		Peggyp57@gmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report no	tification)
For furth	ner information o	concerning this matter, please concerning	all:	
peggy ca			954 638-1754 at ()	
	Name o	f Person	Area Code Daytir	me Telephone Number
Enclosed	l is a check for the	he 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 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

CARTER 501-BAMMA'S SNACK SHACK, LLC.		
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records. Liability Company))
The Articles of Organization for this Limited Liability Company	were filed on 02/06/2019	and assigned
Florida document number L19000037113		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity 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)		For the second
		3 1
		क्षतं क त
Enter new mailing address, if applicable:		20 1
Mailing address MAY BE A POST OFFICE BOX)		[g.], 6
		08 08
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	ffice address on our records, e:	enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		rida
	City	Zip Code

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.

If 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	PEGGY CARTER	660 N.W. 20 AVE POMPANO BEACH, FLORIDA. 33060	= Add
			□ Remove
			Change
 			Add
			□ Remove
			Change
			D Add
			☐ Remove
			□ Change
			☐ Remove
			☐ Change
		Remove	
			Change
			\ Add
			Remove
			☐ Change

). If ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an ef Note:	ive date, if other than the date of filing:
f the re b) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	Λ
	Signature of remover or authorized representative of a member Peggy (arter) Typed or printed name of signee

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Filing Fee: \$25.00