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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT: NFL SWEET, LLC
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dale Wainwright
Name of Person V
WFL Sweet LCC Firm/Company
Firm/Company
5608 (R 249) Address
City/State and Zip Code ALSWelt @ amail. wm E-mail address: (to be used for juture annual report notification)
City/State and Zip Code
E-mail address: (to be used for juture annual report notification)
For further information concerning this matter, please call:
Name of Person at (3816) 590-6760 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
✓ \$25.00 Filing Fee
Certificate of Status Certified Copy Certificate of Status & Cadditional copy is enclosed) Certified Copy
(additional copy is enclosed) (additional copy is enclosed)
Mailing Address: Street Address:
Registration Section Registration Section
Division of Corporations P.O. Box 6327 Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NFL Sweet LLC 2023 JUN 28 AM 7: 44
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on 3/32/30/9 and assigned
Florida document number <u>L 19 0000 S27 lole</u> .
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 "L.L.C."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here:
Name of New Registered Agent: Angela B. Townsend New Registered Office Address: 51.08 CR 249
Enter Florida street address City: Florida 32060 Zip Code New Registered Agent's Signature, if changing Registered Agent:
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.

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

<u>Title</u>	Name	Address	Type of Action
MGR	Amos townsend	5608 CR249	□Add
		Live oak, FC 32060	⊠ Remove
			□Change
MGR	Angela B. Townsend	5608 CF 249	₽Add
		Live oak, Fc 32060	□Remove
			Change
			□Add
			□Remove
			□Change
			🗆 Add
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			□ Change

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	date, if other than the date of filing: $3/20/2003$ (optional)
Hective	date, if other than the date of filing: (optional)
	ve 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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
	's effective date on the Department of State's records.
.,	
record sp	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
l is filed.	
	.0 ()
ated	March 20. 2023.
	+ 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1
	Signature of a surplice of authorized proceentative of a member
	Signature of a member authorized representative of a member
	Signature of a member authorized representative of a member The Wain with the Typed or printed name of signee

NFL Sweet, LLC

Phone: (386) 590-6760

Return Address: 5608 County Road 249

Live Oak, FL 32060

New Managing Member accepts the appointment and states that she is familiar with and accepts the obligations of the position.

Name: A

igela B. Townsel

Signed: