# 1190000 69171

(Re	questor's Name)	<del> </del>
(Ad	dress)	<del></del>
(Ad	dress)	
(Cit	y/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



000342151860

03/19/20--01015--013 \*\*25.00

2020 MAR 19 PH 1:44

### **COVER LETTER**

SUBJECT:	y Slushy LLC		
30 <b>5</b> 0500 CT	Name of Lin	nited Liability Company	
	es of Amendment and fee(s) are sub	_	
	Ambriorix Canela - Man	ager	
		Name of Person	stification)  Section
	Lucky Slushy LLC		
		Firm/Company	
	4100 Bonsall Ave		
		Address	
	Drexel Hill, PA, 19026		
		City/State and Zip Code	
	m.andrade@luckyslushie E-mail address: (	es.com (to be used for future annual report notif	fication)
For further informa	tion concerning this matter, please of	•	
Ambriorix Canela	ı	917 982-5764 at ()	
N	ame of Person	Area Code Daytime	e Telephone Number
Enclosed is a check	for the following amount:		
■ \$25.00 Filing I	Fee \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

lity Company as it now appears on our records.) da Limited Liability Company)	<del></del>
Company were filed on March 11, 2019	and assigned
·	
nited liability company here:	
mited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
	2020 HAR
RESS)	70
	H: 9 11 11 11 11 11 11 11 11 11 11 11 11 1
	SSEE
	<u> </u>
<del></del>	
ed office address on our records, enter the	name of the new registere
•	
Part Claids and add	
, Florid	a Zip Code
	Company were filed on March 11, 2019  nited liability company here:  mited Liability Company." the designation "LLC" or PRESS)  ed office address on our records, enter the  Enter Florida street address , Florid

### 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>	Name	Address	Type of Action
AMBR	Mark Andrade	4100 Bonsall Ave, Drexel Hill, PA 19026	• Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□ Change

# Page 2 of 3

		<del></del>		······································
				·
		<del></del>		<del></del> -
				<del></del>
				<del></del>
				<del></del>
			<del></del>	
		-		
			<del></del>	
				<u>-</u>
		<u> </u>		
	<del></del>		· · · · · · · · · · · · · · · · · · ·	
Effective date, if other than the date is listed, the date must be Note: If the date inserted in this block document's effective date on the Dep	be specific and cannot be prior ck does not meet the applic	cable statutory filing		
ne record specifies a delayed on The 90th day after the recor		ot an effective tir	ne, at 12:01 a.m. on	the earlier o
Dated March 16	2020	<u> </u>		
	a.Comele			
S	ignature of a member or auth	orized representative o	f a member	

Page 3 of 3

Filing Fee: \$25.00