19006187335

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



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COVER LETTER

| Division of Co | orporations | | | |
|------------------------------|--|--|---------------|---|
| SUBJECT: | IDEAL CAR DEMAN | ID LLC | | |
| 30BJEC1: | Name of Lim | ited Liability Company | | |
| The enclosed Articles of | of Amendment and fee(s) are sub- | mitted for filing. | | |
| Please return all corresp | pondence concerning this matter | to the following: | | |
| | | Shaneka Dean | | |
| | | Name of Person | | |
| | <u></u> | Firm/Company | | |
| | 1111 SW 4t | h Terrace | | |
| | | Address | | · · · · · · · · · · · · · · · · · · · |
| | Deerfield Be | each/Florida | 33441 | |
| | | City/State and Zip Code | | |
| | | an.shaneka@gmail.cor to be used for future annual | | n) |
| For further information | concerning this matter, please ca | all: | | |
| Shaneka | Dean | at () | 954-664- | 9030 |
| Name | of Person | Area Code | Daytime Telep | ohone Number |
| Enclosed is a check for | the following amount: | | | |
| □ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee of Certified Copy (additional copy is end | | ■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Addr Registration | | Street A | idress: | |

Registration Section Division of Corporations

¹ TO: Registration Section

P.O. Box 6327 Tallahassee, FL 32314 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

| IDEAL CAR DEMANL | LLC | |
|---|---|---------------------|
| (Name of the Limited Liability Compan (A Florida Limited L. | y as it now appears on our records.) ability Company) | |
| he Articles of Organization for this Limited Liability Company | 07/22/2019 | and assigned |
| orida document numberL19000187335 | | |
| his amendment is submitted to amend the following: | | |
| . If amending name, enter the new name of the limited liabil | ity company here: | |
| Fruit Gemz LLC | | |
| ne new name must be distinguishable and contain the words "Limited Liabili | ty Company," the designation "LLC" or the ab | breviation "L.L.C." |
| nter new principal offices address, if applicable: | 1111 SW 4th Terrace | |
| Principal office address MUST BE A STREET ADDRESS) | Deerfield Beach, FL | |
| | 33441 | |
| ater new mailing address, if applicable: | 1111 sw 4th Terrace | |
| Mailing address MAY BE A POST OFFICE BOX) | Deerfield Beach, FL | - TI |
| | 33441 | |
| | (A) | - m |
| . If amending the registered agent and/or registered office accent and/or the new registered office address here: | ddress on our records, enter the name | e of the new regist |
| Name of New Registered Agent: | · · · · · · · · · · · · · · · · · · · | |
| New Registered Office Address: | Enter Florida street address | |
| | , Florida | |
| - | , Florida 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 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> | Address | Type of Action |
|--------------|-------------|-------------|----------------|
| | | | |
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|). If amend | ing any other infort | nation, enter change(| (s) here: <i>(A</i> | ttach additional s | heets, if necesso | ary.) |
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| (If an effect Note: If | the date inserted in this | must be specific and cannot | be prior to date applicable s | | | al) ng.) Pursuant to 605.0207 (te will not be listed as th |
| the record s | | tive date, but not an effe | ective time, a | t 12:01 a.m. on the | earlier of: (b) | The 90th day after the |
| Dated | April 11th | 20 | 023 | | | |
| | | Signature of a member | or authorized | representative of a m | ember | |
| | (| Shanek | , | ean | | |