Page:

10/25/2019

11:41 AM

TO:18506176383

FROM: 5615375904

Division of Corporations 10/25/2019



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LARSON ACCOUNTING AND CONSULTING SERVICES LLC

Account Number : 120160000067 Phone : (407)370-3686 Fax Number : (407)370-3120

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: FERNANDA . ID

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

APPLE AND CINNAMON LLC

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\$ 14 m	,	COVER LETTER	Œ.	
TO: Registration Sec Division of Corp			!	
APPLE AN SUBJECT:	D CINNAMON LLC			
30BJEC1.	Name of Lim	ited Liability Company		
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	CAROLINE LARSON			
		Name of Person		
	LARSON ACCOUNTING	& CONSULTING SERVICES LLC	С	
	<u> </u>	Firm/Company		
7901 KINGSPOINTE PARKWAY STE 17				
		Address		
	ORLANDO, FL 32819			
City/State and Zip Code				
	PRIVATE@LARSONACC			
		to be used for future annual report notifi-	cation)	
For further information co	oncerning this matter, please or	all:		
CAROLINE LARSON		407 370 3686		
Name of	Person	Area Code Daytime	Telephone Number	
Enclosed is a check for th	e 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:

d

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	OF	1 I had had to
PPLE AND CINNAMON LLC		268 001 25 戸園出
	bility Company as It now appears rida Limited Liability Company)	on our records.)
Organization for this Limited Liability	y Company were filed on 08/1	4/2019LANASSEE FL Mand ass

signed The Articles of (Florida document number ______L19000207849 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 "LLC." 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, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _, Florida ___

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

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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
MGR	MARIELA DE GRAZIA	2250 NE 123 ST	
		North Miami Beach, FL 33181	☐ Remove
			☐ Change
			☐ Remove
			☐ Change
			Add
			□ Remove
			Change
			Add
			☐ Remove
			☐ Change
			□ Add
			Remove
			□ Change
			□ Add
			□ Remove
			□ Change

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		docu	ment's effective date on	the Department of	State's records.			
			ecord specifies a de le 90th day after th			an effective	time, at 12:01 a.m. on the earl	ier of:
		Date	OCTOBER 21		2019			
			-	A1	40	da filoso		
			ADDLE AND OD	·	member or author	ized representativ	c of a member	
			APPLE AND CR	NNAMON ELU	Typed or printed	name of signee		

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Filing Fee: \$25.00