## 119000266518

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		ļ

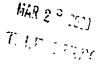
Office Use Only



800341705658

08/10/20--01021--024 \*\*25.00





## **COVER LETTER**

TO: Registration Division of C		•	
	PIKANTE, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The analogue Actions	of Amendment and forter	and the California	
	of Amendment and fee(s) are sub pondence concerning this matter	<u>-</u>	
riease return air corres	pondence concerning this matter	to the following.	
	Wander Ramos		
		Name of Person	
	MUFFY PIKANTE, LLC		
		Firm/Company	<del> </del>
	7601 E. TREASURE DR.	suite #2409	
Address			
	MIAMI BEACH, FL 3314	11	
		City/State and Zip Code	
	Mphsvibes@gmail.com E-mail address: (	to be used for future annual report no	tification)
For further information	a concerning this matter, please c	all:	
Astrid Lopez, Esq.		954 8820405	
Name	e of Person	at () Area Code Daytir	ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addı</u> Registration		Street Address: Registration So	ection
Division of	Corporations	Division of Co	rporations
P.O. Box 6. Tallahassee		The Centre of 2415 N. Monro	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MUFFY PIKANTE, LLC		
( <u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) uted Liability Company)	
The Articles of Organization for this Limited Liability Comp	pany were filed on October 24, 2019	and assigned
Florida document number L19000266518		
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	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	<u>S)</u>	·
		TALL SKE
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		\$ 1 h
		S & G
		1 TO 1
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on our records, <u>enter the r</u>	name of the new registers
and of the new registered writer address mere.		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	Cùy	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>	Address	Type of Action
Mbr	Ivelisse Garcia Santana	3070 Hill Ave, apt 6D	■Add
	Bronx, NY 10467	□Remove	
			□Change
			🗆 Add
			□Remove
			□Change
	<del></del>	□ Add	
			□Remove
			Change
		□ Add	
		□Remove	
		□Change	
<del></del>	<del></del>	□Add	
			Change
		-	□Add
		<del></del>	□Remove
			□Change

	Just adding an additional member to the LLC but keeping the same Managing Member, Wander Ramos
	<del></del>
,	
L'ffoot	ive date, if other than the date of filing: (optional)
(If an ef	ive date, if other than the date of filing:(optional) fective 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 (3
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as th
aocun	nent's effective date on the Department of State's records.
he reco ord is fi	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
	March 5 2020
Dated	
Dated	le le clar
Dated	Signature of a member or authorized representative of a member
Dated	Signature of a member or authorized representative of a member

Filing Fee: \$25.00