## L20000010353

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## **COVER LETTER**

TO:

Registration Section Division of Corporations

	ACK GLOBAL, LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ROY T. MILDNER		
		Name of Person	
		Firm/Company	
	423 DELAWARE AVENU	JE 	
		Address	
	FT. PIERCE, FL 34950		
		City/State and Zip Code	
	RMILDNER@FLORIDAL	EGAL.COM to be used for future annual report noti	fication
For further information c	oncerning this matter, please c	·	incurony
ROY T. MILDNER		772 464-8008	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne 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		<u>Street Address:</u> Registration Se	ction
Division of Corporations		Division of Cor	porations
P.O. Box 632 Tallahassee, l		The Centre of T 2415 N. Monro	allahassee e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limite	d Liability Company as it now appears on our records. A Florida Limited Liability Company)	)
,	A Florida Ellinica Elability Company)	B T
The Articles of Organization for this Limited Lia	ability Company were filed on JANUARY 3, 2020	and assigned
Florida document number L20000010353		2
This amendment is submitted to amend the follo	wing:	る。
A. If amending name, enter the new name of	the limited liability company here:	1:01 1:01
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:	
(Principal office address MUST BE A STREET	TADDRESS)	<del></del>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	<u>30X)</u>	
B. If amending the registered agent and/or reagent and/or the new registered office address	egistered office address on our records, <u>enter th</u> s here:	ne name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Enter riorida street address	
	, Flor	
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

TACO SHACK GLOBAL, LLC

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
MGR	LOUIS LENTINE, SR.	4178 NW BURR OAK COURT	🗆 Add
		JENSEN BEACH, FL 34957	■Remove
			☐ Change
			🗀 Add
			□Remove
			□Change
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·			□Remove
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	the date must be specific ed in this block does n	e and cannot be prior to not meet the applica		(optional) an 90 days after filing.) Purs uirements, this date will	
record specifies a delagistic filed.	yed effective date, but	not an effective tir	ne, at 12:01 a.m. on the	e earlier of: (b) The 900	th day after the
JUNE 22		2020			
		111.	_		

Typed or printed name of signee