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Registration Section

Tallahassee, FL 32314

TO:

Division of Cor	porations			
	S PIZZA GROUP LLC	* ·		
SUBJECT:	Name of Lim	nited Liability Company	•	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	indence concerning this matter	to the following:		
	ROGER MELLEN			
		Name of Person		
	VILLAGES PIZZA GROU	JP LLC		
	Firm/Company			
	6735 CONROY ROAD STE 210			
		Address		
	ORLANDO, FL 32835			
	City/State and Zip Code			
	BMBUSINESSSERVICES	-		
	E-mail address: (to be used for future annual report noti	fication)	
For further information c	oncerning this matter, please c	all:		
BRENT HANSON		407 313-2103		
Name o	f Person		e Telephone Number	
Enclosed is a check for th	ne following amount:			
■ \$25.00 Filing Fee	S30.00 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		Street Address:	ation	
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)	
The Articles of Organization for this Limited Lia Florida document number $\frac{L20000082399}{L20000082399}$	bility Company were filed on 03/16/2020	and assigned
his amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of t	the limited liability company here:	
RP PIZZA GROUP LLC		
he new name must be distinguishable and contain the wo	rds "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	<u>.</u> .
Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE B	<u></u>	
	gistered office address on our records, <u>enter the na</u>	me of the new regis
gent and/or the new registered office address	here:	
Name of New Registered Agent:) Frank
New Registered Office Address:		20 E
	Enter Florida street address	7.
	. Florida	(~)
	City	Zip Code

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

VILLAGES PIZZA GROUP 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>	Name	Address	Type of Action
			□Add
			□Remove
			☐Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
		□Remove	
		□Change	
			□Add
			□Remove
			∏Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: ______ (optional)
(If an effective 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)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. 2021 Signature of a member or authorized representative of a member ROGER MELLEN

Typed or printed name of signee