

L20 000 123 948

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

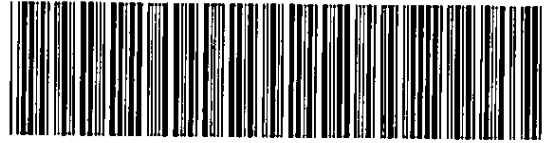
(Document Number)

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21 JUL -8 PM 3:10



RECEIVED

JUL -8 AM 2:02

FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 11, 2021

WALTER DAWSON
127-21 2ND FL LIBERTY AVE
RICHMOND HILL, NY 11419

SUBJECT: AUNT LULU'S NEW YORK STYLE PIZZA, LLC
Ref. Number: L20000123948

We have received your document for AUNT LULU'S NEW YORK STYLE PIZZA, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tekayla T Matthews
OPS

Letter Number: 721A00013031

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AUNT LULLU'S NEW YORK STYLE PIZZA, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

WALTER DAWSON

Name of Person

DAWSON & VIRK ADVISORS, LLC

Firm/Company

127-21 2nd FL LIBERTY AVE

Address

RICHMOND HILL, NY 11419

City/State and Zip Code

WDAWSON@DANDVLLC.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROSEMARIE MORELLO

Name of Person

at (914)

Area Code

755-0600

Daytime 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)

☐ \$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 Address:

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

FLORIDA STATE
DIVISION OF CORPORATION

AUNT LULU'S NEW YORK STYLE PRZZA, LLC JUN 18 PM 3:10

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on MAY 07, 2020 and assigned
Florida document number 420000123948

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 "L.L.C."

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

City

Florida

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

Type of Action

HIGHLANDS MILLS, NY 10930 ☒ Remove

☐ Add☒ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

2021 JUL -8 PM 3:10
DIVISION OF CORPORATIONS

21 JUL -8 PM 3:10

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.

Dated 06-22-2021

R. S. Dawson - Authorized Representative

Signature of a member or authorized representative of a member

WALTER DAWSON

Typed or printed name of signee