L20000149568

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COVER LETTER

Division of Corporations
SUBJECT: Nihhilds i Candies 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:
Lastandra Caines Name of Person
Firm/Company
2231 Church St.
San Gyd, FC 32771 City/State and Zip Code
Lastandria 809mail, Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (LIV1), 683-7552 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\Bigcup \text{\$55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)}\$\Bigcup \text{\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)}\$
Mailing Address: Registration Section Street Address: Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

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**

ed Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	, , , , , , , , , , , , , , , , , , , ,	
The Articles of Organization for this Limited Liability Company Florida document number <u>L 2000149568</u> .	were filed on 00022020 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	333 wilton Circle	
(Principal office address MUST BE A STREET ADDRESS)	Sanford, FL 32173	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	333 Wilton Circle	
3. If amending the registered agent and/or registered office a	address on our records, enter the name of the new registe	
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:		
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent and agree agents of all statutes relative to the proper and complete	ee to act in this capacity. I further agree to comply	

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	ΔΕΙ ΑΕΓ 17 ΑΕΙ ΙΟ: 41	Type of Action
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				□Remove
		<u></u>		□Change
				
				□Remove
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				□Remove
				Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
I am chaming the address from
2231 Church St. Sanford FL 32771
to 333 Wilton Circle, Sanford, FL
32113
· ·
E. Effective date, if other than the date of filing:
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 8 11 . 2020.
Lastandia Haus Signature of a member or authorized representative of a member
Lastandria Gaines Typed or printed name of signce