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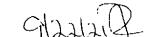
(Requestor's Name)
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COVER LETTER

Registration Section Division of Corporations

:О:

UBJECT: TエーNI	ICHOLE, LLC		
	Name of Lim	ited Liability Company	
"ha analogad Articles of	Amendment and fee(s) are sub	mitted for filing	
the enclosed Afficies of A	Amendment and rec(s) are sub	mined for thing.	
lease return all correspon	idence concerning this matter	to the following:	
	PATICA WAT	SON	
		SON Name of Person	
		_	
	TI'NICHOLE,	LLC Firm/Company	
		i itti Company	
	1550 11 [™] STI	REET NF C5	
		REET NE C5 Address	
	WINTER HAVE	EN FL 33881 City/State and Zip Code	<u>.</u>
	1 I CA T 3 @ YA H	OO COM to be used for future annual report noti:	fication)
for further information of	oncerning this matter, please co	alle	
or former information ex	meering this matter, prease e.	un.	
PATICA WAT	SON	at (407) 747-9	1064
Name of	Person	at (<u>407</u>) <u>747-9</u> Area Code Daytim	e Telephone Number
inclosed is a check for th	e following amount:		
	_	Elegas oo milka Baar B	C 660 00 EU- E-
☐ \$25.00 Filing Fee	✓ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
-			(additional copy is enclosed)
Mailing Address	٠.	Street Address:	
Mailing Address: Registration Section		Registration Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		The Centre of T	
Tallahassee, F	·L 32314	2415 N. Monro Tallahassee, FL	e Street, Suite 810
		rananassee, i L	, V

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability (A Florida Li	Company as it now appears on our records.) mited Liability Company)	
e Articles of Organization for this Limited Liability Con	npany were filed on <u>07/09/2020</u>	and assigned
orida document number <u>L20000 196074</u> .		
is amendment is submitted to amend the following:		
If amending name, enter the new name of the limited	d liability company here:	
TI'NICHOLE'S DESSERTS & M c new name must be distinguishable and contain the words "Limited	ORE LLC	
e new name must be distinguishable and contain the words "Limited	I Liability Company," the designation "LLC" or the al	obreviation "L.L.C."
nter new principal offices address, if applicable:		
rincipal office address MUST BE A STREET ADDRES	<u>SS)</u>	
nter new mailing address, if applicable:	-	
failing address MAY BE A POST OFFICE BOX)		
		<u> </u>
If amending the registered agent and/or registered o ent and/or the new registered office address here:	ffice address on our records, enter the nan	ne of the new registered
Name of New Registered Agent:		
New Registered Office Address:		-1
	Enter Florida street address	
	, Florida	· · · · · · · · · · · · · · · · · · ·
	City	Zip Code
w Registered Agent's Signature, if changing Registered A	Agent:	.``
hereby accept the appointment as registered agent an covisions of all statutes relative to the proper and conscept the obligations of my position as registered agenting filed to merely reflect a change in the registered ompany has been notified in writing of this change.	iplete performance of my duties, and I am nt as provided for in Chapter 605, F.S. Or,	familiar with and if this document is
	If Changing Registered Agent, Signature of New Ro	gistered Agent

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

GR = Manager MBR = Authorized Member

<u>tle</u>	<u>Name</u>	Address	Type of Action
			□Remove
			□Change
			□Add
			□Remove
			□Change
	 -		□Add
			□Remove
			□ Change
			□Add
			□Remove
		<u> </u>	□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change

	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
effecti e: If t	date, if other than the date of filing:
cord sp filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ed <u>S</u>	EPTEMBER 5TH . 2021 .
	PATICA N. WATSON Typed or printed name of signer
	Signature of a member or authorized representative of a member
	PATICA N. WATSON Typed or printed name of signee
	MILLA N. MAISON