## K20000246394

(Requestor's Name)
(Address)
(Address)
(131131)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
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Q. SILAS FEB 24 2022
FEB 24 2022

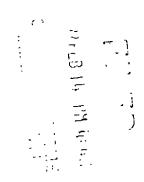
Office Use Only



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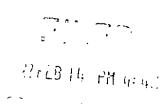
## **COVER LETTER**

TO:

TO:	Registration Se Division of Co						
SUBJEC	Vybe305 F	Restaurant, LLC					
SUBJEC	, I :	Name of Lin	nited Liability Company				
The encl	osed Articles of	Amendment and fee(s) are sub-	omitted for filing.				
		ondence concerning this matter					
		Kayvon Webster					
			Name of Person	<del></del>			
		Vybe305 Restaurant, LLC					
			Firm Company				
		486 NE 167th Street					
			Address				
		Miami, Fl. 33162					
			City/State and Zip Code				
		kwebster305@gmail.com					
			to be used for future annual report no	otification)			
For furth	er information e	oncerning this matter, please e	all:				
Kayvon	Webster		786 863-2818				
	Name o	f Person	Area Code Dayti	me Telephone Number			
Enclosed	is a check for th	ne following amount:					
<b>■</b> \$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy tadditional copy is enclosed)			
Mailing Address: Registration Section		Street Address:	aatian				
Registration Section Division of Corporations			Registration Section Division of Corporations				
	P.O. Box 632	7	The Centre of	Tallahassee			
	Tallahassee, I	FL 32314	2415 N. Monro	oe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



Zip Code

Vybe305 Restaurant LLC

(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 Florida document number 1,20000246394	y were filed on	and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	bility company here:				
The new name must be distinguishable and contain the words "Limited Liab	thity 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 agent and/or the new registered office address here:	address on our records, <u>enter</u>	the name of the new registered			
Name of New Registered Agent:					
New Registered Office Address:					
	Emer Florida street address				
	Flo	orida			

## 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 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
Mr	Alex Luc	486 NE 167th Street	□Add
		Miami, Fl. 33162	
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			□Remove
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tote. If the	date miseried i	han the date of date must be spe in this block do on the Departm	es not meet t	he applicable	ate of filing or statutory life	more than 90 ng requirer	days after finents, this i	iar) ling.) Pursuan late will not	t to 605,020 be listed as
record speci Lis filed.	fies a delayed	l effective date,	but not an el	Tective time,	at 12:01 a.m	. on the ear	lier of: (b)	The 90th da	sy after the
Februa	iry 9	<del></del>		22 .					
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		Signati	relof a memb	er or authorize	d representativ	e of a memb	er		

Filing Fee: \$25.00