L20000298553

(Requestor's Name)
(Address)
1000001
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





400375037824

10/15/21--01024--001 **25.00

SECRETARY OF STATE
SECRETARY OF STATE

Y. SCOTT OCT 26 2021



zenbusiness

Oct 14, 2021

Florida Secretary of State Division of Corporations 2415 N Monroe St Suite 810 Tallahassee, FL 32303

RE: The Sticka Emporium L.L.C.

FILED

2021 OCT 15 PH 2: 10

SECRETARY OF STATE
TALLANDASSES

To Whom It May Concern:

Attached please find the executed <u>CERTIFICATE OF AMENDMENT</u> for the above referenced. Please review and file the attached document on a routine basis.

Once completed please forward the filed confirmation or notification to the address listed below:

ZenBusiness Inc Attention: Kelly Castro 5511 Parkerest Dr., Suite 103 Austin Tx 78731

If you have any questions, please feel free to contact me at 844-493-6249 or at fulfillment@zenbusiness.com.

Thank you,

Kelly Castro

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Sticka Emporium L.L.C.			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	iny as it now appears on our reco Liability Company)	<u>rds.</u>)	
he Articles of Organization for this Limited Liability Company	were filed on	and assigned	
orida document number 1.20000298553			
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited liab	ility company here:		
ne new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LI		
nter new principal offices address, if applicable:	2116 Deerbrook Dr	021 c ECR	
Principal office address MUST BE A STREET ADDRESS)	Lakeland, FL 33811	AAA CI	
		55 57	
Enter new mailing address, if applicable:	2116 Deerbrook Dr	PM 2: PEF STA	
Mailing address MAY BE A POST OFFICE BOX)	Lakeland, FL 33811	TE 10	
. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ent</u>	er the name of the new regi	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street addr	ress	
	ı	Florida	

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. Thereby confirm that the limited liability

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the

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>	<u>Address</u>	Type of Action
AMBR	Juliana Maria Stillinger	2116 Deerbrook Dr	□Add
		Eakeland, FL 33811	□Remove
			= Change
AMBR	Tyler Patrick Flardiman	829 East Lime Street	□Add
		Lakeland, FL 33801	G Remove
			Changel Changel
			Change 15 Add 1 D Add 1 D Remove
			□Add
			□Remove
			□Change
			🗖 Add
		Remove	
			□Change
			🗀 Add
			□Remove
			□Change

				-
	·	W		
				
			-	
				S 2
				
		_	7) 7)	15
			- <u> </u>	
			75	is O
-	·-			-0
		-		
			<u></u>	
fective date, if other than the d	ate of filing:		(optional)	
in effective date is listed, the date must bote: If the date inserted in this bloc	be specific and cannot be prior	to date of filing or more (than 90 days after filing.)	Pursuant to 605.0207 will not be listed as
ecument's effective date on the Dep			1	
ecord specifies a delayed effective is filed.	date, but not an effective ti	me, at 12:01 a.m. on t	he earlier of: (b) - I h	2 90th day after the
	2021	_		
nted	·	_		
nted October 14	Stillinger ignature of a member or author	_		

.

Filing Fee: \$25.00