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SECRUTARY OF STATE

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A. RIVERS MAY - 6 2023

COVER LETTER

Division of Co	rporations				
LetsFatCa SUBJECT:	keXx 1.1.C				
SUBJECT:	Name of Lim	ited Liability Company	··		
The enclosed Articles of	Amendment and fee(s) are sub	Name of Limited Liability Company Idment and fee(s) are submitted for filing. Ide concerning this matter to the following: Imparison a submitted for filing. In this matter to the following: In this matter to the following: In this matter to the following: In this matter, please call: In this matte			
Please return all correspo	ondence concerning this matter	to the following:			
	Stephanie Goebel				
Name of Person					
	ZenBusiness Inc.				
	 	Firm/Company			
	5511 Parkcrest Drive, Ste. 103				
	-	Address			
	Austin, TX 78731				
		City/State and Zip Code			
	fulfillment@zenbusiness.co				
	E-mail address: (to be used for future annual report notifi	cation)		
For further information of	concerning this matter, please co	all:			
Stephanie Goebel c/o Zo	enBusiness Inc.	844 493-6249 at ()			
Name (of Person	Area Code Daytime	Telephone Number		
Enclosed is a check for t	he following amount:				
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy		

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LetsEatCakeXx 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 were filed on 10/28/2020 and assigned Florida document number $\underline{1.20000342596}$ 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 "LLC." 2359 Clemblue Rd. Clermont, FL 34715 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 2359 Clemblue Rd. Clermont, FL 34715 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:

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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	Kyle Poffenbarger		Add
			Remove
		2359 Clemblue Rd. Clermont, FL 34715	■ Change
	 		
			□ Remove
			Change
			Add
			☐ Remove
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			□ Remove
			☐ Change
			Add
			☐ Remove
			☐ Change

If amending, a	ny other information,	enter change(s) her	e: (Attach additi	ional sheets, if nece	essary.)
					
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Note: If the da	, if other than the date e is listed, the date must be space te inserted in this block de ective date on the Departi	loes not meet the applic	cable statutory filir	(option ore than 90 days after any requirements, this	onal) filing.) Pursuant to 605.0207 date will not be listed as
	ecifies a delayed effe ay after the record i		ot an effective	time, at 12:01 a	i.m. on the earlier of
Pebruar	y 28	2023	·		
	Cyle Poffenbarger				
_	Signa	sture of a member or auth	orized representativ	e of a member	
Kyl	e Poffenbarger				
		Typed or prin	ted name of signee		

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Filing Fee: \$25.00