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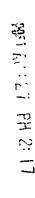
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## **COVER LETTER**

TO:

Tallahassee, FL 32314

	Registration Sec Division of Corp			,
ID.C	Lulu's Dum	plings LLC		÷
SUBJEC	.1:	Name of Lim	ited Liability Company	
The enck	osed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspon	ndence concerning this matter	to the following:	
		Danna Tibbetts		
		-	Name of Person	
			Firm/Company	
		117 Prestwick Grande Dr		
			Address	
		Daytona Beach, FL 32124		
			City/State and Zip Code	
		·	to be used for future annual report no	otification)
		oncerning this matter, please ca		
Danna T			386 852-1002 at ()	
	Name of	f Person	Area Code Dayti	ime Telephone Number
Enclosed	l is a check for th	ne following amount:		
■ \$25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section		Street Address: Registration S	Section	
	Division of C		Division of C	
	P.O. Box 632	7	The Centre of	Tallahassee
	Tallahassee, I	FL 32314	2415 N. Moni	roe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lulu's Dumplings LLC		_
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.)  office Company)	
The Articles of Organization for this Limited Liability Company was Florida document number L20000372899	ere filed on and and	assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	y company here:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbreviation	ı"L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	।(न्ह 2)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		<u>p.                                    </u>
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	¥.	new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City Zip Co	ode

## 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 mercly 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>	<u>Address</u>	Type of Action
MGR	Jason Tibbetts	117 Prestwick Grande Dr	<b>■</b> Add
		Daytona Beach, FL 32124	□Remove
			□Change
			□ Remove
			≥Change
			Add
		<del> </del>	
			□Change
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fective date, if other than the an effective date is listed, the date muote: If the date inserted in this becument's effective date on the D	lock does not mee Department of State	t the applicable's records.	e statutory film	g requirements,	this date w	ill not be listed a
ecord specifies a delayed effectivis filed.	ve date, but not an	effective time	, at 12:01 a.m.	on the eartier of	. (u) The	20111 day alter th
August		16				