## L20 000387251

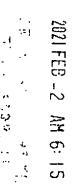
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

TO:

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT:		EY WEST LLC		
30DJLC1.			ited Liability Company	
The enclosed	! Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		ALEX FLORES		
•		<del></del>	Name of Person	
	AFLO ENTERPRISES LLC Firm/Company			
			Firm/Company	
		916B KENNEDY DRIVE	Name of Person  Firm/Company  Address  40  City/State and Zip Code  DM  be used for future annual report notification)	
			Address	<del></del>
		KEY WEST, FLORIDA 33040  City/State and Zip Code		
			City/State and Zip Code	
		YUMMYGO305@GMAIL		
For further i	nformation c	t:-mail address: ( oncerning this matter, please c		offication)
		oncerning this matter, please co		
ALEX FLO	RES 		305 304-1011 at ()	
	Name o	l'Person	Area Code Dayt	ime Telephone Number
Enclosed is:	a check for th	ne following amount:		
<b>■</b> \$25.00 1	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
	iling Addres gistration S			ection
	~	orporations	Division of C	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2021 FEB - 2 AM 6: 15

FOODIE KEY WEST LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	rere filed on 12/11/2020	and assigned
Florida document number L20000387251		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ty company here:	
YUMMY GO LLC		
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	A	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	·	
		· <del></del>
B. If amending the registered agent and/or registered office ac	dress on our records, enter the nan	an of the more parietored
agent and/or the new registered office address here:  Name of New Registered Agent:		ne of the new registered
agent and/or the new registered office address here:		ne of the new registered
agent and/or the new registered office address here:  Name of New Registered Agent:	Enter Florida street address	ne of the new registered
agent and/or the new registered office address here:  Name of New Registered Agent:	Enter Florida street address , Florida	
Name of New Registered Agent:  New Registered Office Address:		
agent and/or the new registered office address here:  Name of New Registered Agent:	Enter Florida street address Florida Cuy	Zip Code

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 = AMBR =	Manager Authorized Member	to the last	
<u>Title</u>	Name	Address -2 AM 6: 15	Type of Action
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			□Remove
,			□Add
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f an effective date is list <mark>Note:</mark> If the date inso	ed, the date most be spe rted in this block do	of filing:  cific and cannot be prior to es not meet the applicab ent of State's records.	date of filing or more than		
record specifies a do	layed effective date,	hut not an effective time	e, at 12:01 a.m. on the c	earlier of: (b) The	: 90th day after the
Dated JANUARY 27	<del>- ////////////////////////////////////</del>	2021	AFL F.T.	worus IUC	
	Signati	are of a member or authori	red representative of a me	mber	

Filing Fee: \$25.00