LZ0000390316

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COVER LETTER

Registration Section Division of Corporations

Gonzalez's Sweet House, LLC

JECT:				
	Name of Lim	ited Liability Company		
enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
ie return all correspo	indence concerning this matter	to the following:		
	Moises A. Saltiel			
		Name of Person		
	Saltiel Law Group			
		Firm/Company		
	2600 S. Douglas Rd., Stc.	502	. ,	21
		Address		121
	Coral Gables, FL 33134		-111 	2021 JAN 13 PM 2
		City/State and Zip Code		ယ ၂
	moises@saltiellawgroup.co	m		- P
	E-mail address: (to be used for future annual report notifi	cation)	5 5
further information c	oncerning this matter, please ca	all:		90
ses A. Salticl		305 735-6565		
Name o	f Person	Area Code Daytime	Telephone Number	_
osed is a check for the	he following amount:			
\$25.00 Filing Fcc	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing F Certificate of S Certified Copy (additional copy is	Status &
Mailing Addres	<u>ss:</u>	Street Address:		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gonzalez's Sweet House, LLC

(Name of the Limited Liability Compa (A Florida Limited	nny as it now appears on our Liability Company)	records.)
Articles of Organization for this Limited Liability Company la document number L20000390316	were filed on December	14, 2020 and assigned
amendment is submitted to amend the following:		
amending name, enter the new name of the limited liab	oility company here:	
w name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	n "LLC" or the abbreviation "L.L.C."
new principal offices address, if applicable:	12851 SW 149 St.	
cipal office address MUST BE A STREET ADDRESS)	Miami, FL 33186	2021
new mailing address, if applicable:	12851 SW 149 St.	w
ing address MAY BE A POST OFFICE BOX)	Miami, FL 33186	
		72: C
amending the registered agent and/or registered office and/or the new registered office address here: Name of New Registered Agent:	address on our records,	enter the name of the new register
New Registered Office Address:	Enter Florida stree	t address
		, Florida
	City	Zip Code
Registered Agent's Signature, if changing Registered Agent:		
eby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete of the obligations of my position as registered agent as a filed to merely reflect a change in the registered office any has been notified in writing of this change.	performance of my dut provided for in Chapter	ies, and I am familiar with and 605, F.S. Or, if this document is
If Cha	nging Registered Agent. <u>Sigr</u>	nature of New Registered Agent

ending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added moved from our records:

: =	M	an	95	er

t = Manager R = Authorized Member

<u>Name</u>	<u>Address</u>	Type of Action
		□Add
	- 	□Remove
		□Change
		□Add
		2021 Change
		~ Add
		NO NO Remove
		☐ Change
		□ Add
		Петюve
		Change
	<u>. </u>	□ Remove
	<u> </u>	Change
		□Add
		□Remove

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		평충	2021	
		72-50 77_33		
		<u> </u>	<u> </u>	•
.		<u> </u>		}
		:100	<u> </u>)
			07	
——————————————————————————————————————				
ve date, if other than the date of filing:	filing or more than 90 da	(optional)	Pursuant to 605	020
If the date inserted in this block does not meet the applicable state				
ent's effective date on the Department of State's records.				
I specifies a delayed effective date, but not an effective time, at 12	2:01 a.m. on the earlie	rof:(b) The	90th day after	· the
ed.		(1)		
January 8 2021				
111 Salue				
Signature of a member or authorized rep	resentative of a member			

Filing Fee: \$25.00