## L21000012877

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

TO: Registration So Division of Cor						
Verde Spre	out LLC					
SUBJECT:	SUBJECT:Name of Limited Liability Company					
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Maria M Velandia					
		Name of Person	<del></del>			
	Verde Sprout LLC					
Firm/Company						
13619 Tortona Lane Apt 3117						
	<del></del>	Address				
	Windermere, FL 34786					
	lovelybitesorlando@gmail.e	City/State and Zip Code com to be used for future annual report noti	fication)			
For further information c	concerning this matter, please c	all:				
Maria M Velandia		407 821-7010 at ()				
Name of Person			ne Telephone Number			
Enclosed is a check for t	he following amount:					
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Addres		<u>Street Address;</u> Registration Se	ction			
Division of Corporations		Division of Corporations				
P.O. Box 6327		The Centre of Tallahassee				

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTÍCLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Verde Sprout LLC				
( <u>Name of the Limi</u>	ted Liability Comp: (A Florida Limited	any as it now appears on our reco Liability Company)	ords.)	
The Articles of Organization for this Limited L	iability Company	were filed on 01/04/2021	and assigned	
Florida document number L21000012877	·			
This amendment is submitted to amend the following	lowing:			
A. If amending name, enter the new name of	of the limited liab	oility company here:		
Lovely Bites LLC				
The new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the designation "L	LC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		13619 Tortona Lane		
		Apt 3117		
		Windermere, FL 34786		
			• •	
Enter new mailing address, if applicable:		13619 Tortona Lane	· :	
(Mailing address MAY BE A POST OFFICE BOX)		Apt 3117		
		Windermere, FL 34786	. ,	
			- ·	
B. If amending the registered agent and/or		address on our records, <u>ent</u>	· · · · · · · · · · · · · · · · · · ·	
agent and/or the new registered office addre	ess here:			
			. 5	
Name of New Registered Agent:			<del></del>	
New Registered Office Address:	13619 Tortona	Lane Apt 3117		
		Enter Florida street address		
	Windermere		Florida <sup>34786</sup>	
		City	Zip Code	

## 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 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.

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>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
		·	□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			Cladd
			□Remove
		<del></del>	☐Change
<del></del>			□Add
			Remove
			□ Chapus

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated \_\_\_\_\_ February 15 2024

Typed or printed name of signee

Maria M. Velandia