LAZARUS CORPORATE

(((H21000159865 3)))



H210001598653ABC4

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To:

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 : (305)552-5973 Phone : (305)675-5944 Fax Number

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SWEET FRUIT LLC

Certificate of Status	0	
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Page Count	04	
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Sweet Fr	wit LLC
	bility Company as it now appears on our records.) orda Limited Liability Company)
The Articles of Organization for this Limited Liabilit Florida document number <u>L21000220</u>	ry Company were filed on Jan. 25, 2021 and assigned
This amendment is submitted to amend the following	
A. If amending name, enter the new name of the	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	
(Principal office address MUST BE A STREET A	ODRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO)	<u></u>
B. If amending the registered agent and/or regis	stered office address on our records, <u>enter the name of the new registered</u> ere:
agent and of the nove	~ 10
Name of New Registered Agent:	Priscilla Marie Del Key
New Registered Office Address:	Enter Florida street address
	Migni Herida Hip Code
Simple of changing Res	City Tap College City
New Registered Agent's Signature, if changing Reg	to the state of the compacity I further agree to comply with the
provisions of all statutes relative to the proper	agent and agree to act in this capacity. I further agree to comply with the and complete performance of my duties, and Lam familiar with and cred agent as provided for in Chapter 605, F.S. Or, if this document is gistered office address, I hereby confirm that the limited liability
company has been notified in writing of this ch	nange.
	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

Title	Name	Address	Type of Action
	Gloria Baez	10485 SW 216th 5t. Apt. 104 Migmi, F1 133190	Ayadd
			Пстюче
			Change
AMBR	Priscilla Del Rey		\ \Add
	_	6435 SW 102 rd St.	iXRemove
			Change
AMBR	Priscilla Marie Del Re	5 C435 SW 102md St. Diami, FL 33156	<b>X</b> )Add
			□Remove
			Change
			Remove
			Change
			Remove
			Change
			□Add
			□Remove
			□ Change

If amending any other information, enter change(s) her	re: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be price.  Note: If the date inserted in this block does not meet the apple document's effective date on the Department of State's record.	(optional) or to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (sicable statutory filing requirements, this date will not be listed as this.
the record specifies a delayed effective date, but not an effective cord is filed.	time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated April 19 , 202	
Signature of a member of au	therized representative of a member
Priscilla	Marve Pel Key