## 121000052983

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

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## **COVER LETTER**

TO: Registration Section

Division of Cor	porations		
	ized Member		4
SUBJECT:	Name of Lin	ited 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:	73
	HOWARD HARDING		
		Name of Person	
	BIB BITE BBQ N MORE	LLC	
	<del></del>	Firm/Company	
	1549 BLUE HERON BLA	'D	
		Address	<del></del>
	RIVIERA BEACH FL 33-	104	
		City/State and Zip Code	<del></del>
	hardinghoward@gmail.com	to be used for future annual report no	differentiant
For further information c	oncerning this matter, please c	•	ancau(m)
HOWARD HARDING	oncerning and matter predice o		
		561 4520195 at () Area Code Dayti	
Name o	f Person	Area Code Dayti	me Telephone Number 5
Enclosed is a check for the	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 Registration 9		Street Address: Registration S	ection
Division of Corporations		Division of Co	
P.O. Box 632		The Centre of	
Tallahassee, l	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee. FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BIG BITE BBQ N MORE LLC

	pany as it now appears on our records.) I Liability Company)	
ne Articles of Organization for this Limited Liability Compar	y were filed on	and assigned
orida document number 1.21000052983		·
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited lia	bility company here:	
te new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the abl	e eviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
		•
nter new mailing address, if applicable:		
lailing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or registered office	address on our records, enter the name	e of the new registe
gent and/or the new registered office address here:	•	
gent and/or the new registered office address here:		7.6
		2021
ent and/or the new registered office address here:	Enter Florido swoot address	202
ent and/or the new registered office address here:  Name of New Registered Agent:	Enter Florida street address	2021
ent and/or the new registered office address here:  Name of New Registered Agent:	Enter Florida street address, Florida	167
Name of New Registered Agent:  New Registered Office Address:	Enter Florida street address, Florida City	Zip Code =
Name of New Registered Agent:	, Florida City	Zip Code III

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	HOWARD HARDING	390 W 32 STREET RIVIER BEACH FL33404	<b>=</b> Add
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			* □Chanş e
			□Remove
		<u> </u>	□Change
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fection of the contract of the	ve date, if other than the date of filing:
<u>ote:</u>	If the date inserted in this block does not meet the applicable statutory filing requirements, this date well not be listed a mu's effective date on the Department of State's records.
ecore is file	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
ited _	2/22//2021
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00