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COVER LETTER

Division of Co	rporations		
THE CHO	COLATE DANDIES, LLC		
30 00 000	Name of Li	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.	
	ondence concerning this matte	•	
	NOBLE SISSLE		
	···	Name of Person	
		Firm/Company	<u> </u>
	917 SADDLE CREEK RI	JN	
		Address	<u> </u>
	TALLAHASSEE, FL 323	01	
	thechocolatedandies@gma	City/State and Zip Code	
		to be used for future annual report notif	fication)
For further information of	concerning this matter, please o	all:	
NOBLE SISSLE		850 728-1904	
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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 S		Street Address: Registration Sec	tion
Division of C		Division of Corr	

P.O. Box 6327

TO:

Registration Section

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

THE CHOCOLATE DANDIES, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 02/15/2021 and assigned Florida document number L21000077393 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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 ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	MARIE E SISSLE	917 SADDLE CREEK RUN	□ Add
		TALLAHASSEE, FL 32301	■Remove
			□Change
MGR	NOBLE L SISSLE, IV	917 SADDLE CREEK RUN	
		TALLAHASSEE, FL 32301	■Remove
			□Change
MGR	ROYAL B SISSLE, SR	917 SADDLE CREEK RUN	
		TALLAHASSEE, FL 32301	≣Remove
			Change
MGR	KNIGHT C SISSLE, SR	917 SADDLE CREEK RUN	
		TALLAHASSEE, FL 32301	≅Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change

ective date, if other than the date of filing: (optional) (optional) (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 605.02 (cord 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 filed. (SEPTEMBER 16 2021 (SEPTEMBER 16 2021 (Signature of a member or suthorized representative of a member NOBLE L SISSLE, III	REMOVING MANAGERS T	O REMAIN AS A SINGL	E MEMBER LLC		
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