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## **COVER LETTER**

Tallahassee, FL 32314

TO: Registration Section

Divis	sion of Cor	porations				
		Wayne Sandwich Shop LL	С			
SUBJECT: _	Name of Limited Liability Company					
The enclosed	Articles of .	Amendment and fee(s) are sub	mitted for filing.			
Please return :	all correspo	ndence concerning this matter	to the following:			
		Wayne Harvin				
			Name of Person			
		Janice and Wayne Sand	lwich Shop			
			Firm/Company			
		2670 SW 87th Ave				
			Address			
		Davie FL 33328				
			City/State and Zip Code			
		hwharvin2001@yahoo.co	om to be used for future annual rep	port notification)		
For further in	formation c	oncerning this matter, please c	all:			
Wayne Harv	in		954 380-			
	Name o	(Person	at () Area Code	Daytime Telephone N	Number	
Enclosed is a	check for th	ne following amount:				
■ \$25,00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Ce	0.00 Filing Fee. ertificate of Status & ertified Copy (ditional copy is enclosed)	
	ing Addres		Street Add	ress: ion Section		
Registration Section Division of Corporations				of Corporations		
P.O. Box 6327			The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Janice and Wayne Sandwich Shop		
(Name of the Limited Liability Compac (A Florida Limited L	ny as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L21000088998	were filed on February 23, 2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
Chef Janice and Wayne Sandwich Shop		
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abb	oreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		<del></del>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name	e of the new registers
Names of Name Danier and Amounts		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	-0
	Enter Florida street address, Florida City	5
	, Florida	750 Control C
	Сцу	zip Code .
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agro provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my duties, and I am for provided for in Chapter 605, F.S. Or, i	miliar with and if this document is

company has been notified in writing of this change.

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>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
	<u> </u>		□Add
			☐ Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change

ii ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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If an ef Note:	ive date, if other than the date of filing:
e record ord is fi	rd 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 ded.
Dated	Signature of a member or authorized representative of a member
	Wayne Harvin
	Typed or printed name of signee

Filing Fee: \$25.00