

L21000089739

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

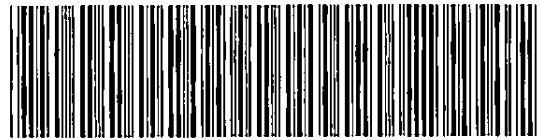
(Document Number)

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FILED
2023 MAY 15 AM 8:03
CLERK OF DISTRICT COURT
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 10, 2023

COREY FOUNTAIN SR.
4280 BOOKER ST.
ORLANDO, FL 32811

SUBJECT: FOUNTAINS CATERING & VENDERING LLC
Ref. Number: L21000089739

We have received your document for FOUNTAINS CATERING & VENDERING LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

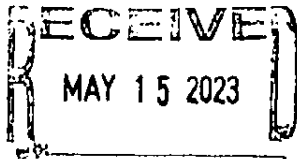
The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Alecia Rivers
Regulatory Specialist II

Letter Number: 723A00003305



**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Fountains Catering & Vending 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 Feb 8, 2021 and assigned
Florida document number L21000099739.

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)

4280 Booker St

Orlando, FL 32811

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 551137

Orlando, FL 32855

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:

Corey Fountains Sr

New Registered Office Address:

4280 Booker St

Enter Florida street address

Orlando

City

Florida

Zip Code

FL 32811

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.

Corey Fountains Sr
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>	<u>Type of Action</u>
MGR	Felicia Rhodes	4724 Oleander Drive	<input type="checkbox"/> Add
		Tallahassee, FL 32305	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Corey Fountain Jr	4724 Oleander Dr.	<input type="checkbox"/> Add
		Tallahassee, FL 32305	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Ambr	Cartavious Fountain	4724 Oleander Dr	<input type="checkbox"/> Add
		Tallahassee, FL 32305	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Ambr	Jatavious Fountain	4724 Oleander Dr	<input type="checkbox"/> Add
		Tallahassee, FL 32305	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jarvis Fountain	4280 Booker St.	<input checked="" type="checkbox"/> Add
		Orlando, FL 32811	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Corey Fountain	4280 Booker Street	<input checked="" type="checkbox"/> Add
		Orlando, FL 32811	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

— 1 —

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TALLAHASSEE, FL

E. Effective date, if other than the date of filing: Feb 4, 2021 (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

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00