L21000102027

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 18, 2021

LISA GUIA 11220 CARAVEL CIRCLE UNIT 110 FT MYERS, FL 33908

SUBJECT: FLORIDA FRESH VENDS, LLC

Ref. Number: L21000102027

We have received your document for FLORIDA FRESH VENDS, 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):

In order to file this amendment, you must complete the Authorized Persons page. You can change the titles on this page and also on the last page write how you want the business percentages split between you both. It will be imaged and on the website for the bank to see.

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.

Summer Chatham OPS

Letter Number: 021A00013720

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TO:	•	gistration Section ision of Corporations	
SUBJI	ECT:	Florida Fresh Vends LLC	Name of Limited Liability Company
			Name of Emilied Elability Company
The en	closed	d Articles of Amendment and	d fee(s) are submitted for filing.
Please	returr	all correspondence concern	ing this matter to the following:

	Name of Person
Florida Fresh Vends LLC	
13.75.	Firm/Company
11220 Caravel Circle, Unit 11	0
	Address
Ft Myers, FL, 33908	
(City/State and Zip Code
.isa.L.Guia@gmail.com	
E-mail address: (to b	be used for future annual report notification)

561

For further information concerning this matter, please call:

		at ()		
Name o	of Person	Area Code	Daytime Telephone Number	721
Enclosed is a check for t	he following amount:			
[] \$25.00 Filing Fee	■ \$30,00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy	Certificate	of Status &
		(additional copy is enclo		lo py) op y is enclosed)

Lisa Guia

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

601-0499

 \mathcal{D}

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

A. If amending name, enter the new name of the limited liab	Since Company News		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "ELC" or the a	bbreviation "I	L.C."
Enter new principal offices address, if applicable:	<u></u>		
(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	no of the no	w rogist
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	aduress on our records, enter the har	ne or the ne	m registi
		~~	2
Name of New Registered Agent:			
Now Davistaged Office Address:			
New Registered Office Address:	Enter Florida street address		- :
		D ₹3p Code	- 1

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.

New Registered Agent's Signature, if changing 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 Type of Action Address Title Name Pres Lisa L. Guia Same as on File DAdd ____ □Remove Some as on file. DAdd □Remove ____ DChange □Change <u>F≡</u> □Add <u>F</u> □ Remove <u>∼</u> □Change _____ □Add _____ □Remove □ Change

	to open our business account until my Articles	
	de/percentage of ownership in the business. The	
	did this process online. Lassigned myself the ti	
	be clearer and to re-assign our titles to President	<u>, , , , , , , , , , , , , , , , , , , </u>
	gan our Articles assigning a percentage of own	
		tership interest. Such titulere is anything on
your end regarding that,	it should be entered as 50%/50%.	
Amending	to reflect husband	z wife each with
50%		
Lisa Gui	ia = President = 50	90
Ribert	Guia = Vice President	= 500-
PIWEN S.	Out. 1125106111	<u> </u>
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ctive date, if other tha	ASAP	(optional) ;
effective date is listed, the da	te must be specific and cannot be prior to date of filing his block does not meet the applicable statutory	ig or more than 90 days after filings-Pursuant to 605
iment's effective date on	the Department of State's records.	Ē
ord chacifies a deloved et	Tective date, but not an effective time, at 12:01	a.m. on the earlier of: (b) The 90th day afte
filed.		•
	2021	
May 10	2021	
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