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COVER LETTER

TO:

Registration Section

Division of Co	rporations			
	se BBQ LLC			
SUBJECT:	Name of Limi	ited Liability Company	.	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	Herman Platt			
		Name of Person		
	Praise House BBQ LLC			
		Firm/Company		
	PO BOX 48063			
		Address		
	JACKSONVILLE, FL 322	47-8063		
		City/State and Zip Code		
	praischousebbq@gmail.com			
	E-mail address: (to be used for future annual report notif	ication)	
For further information	concerning this matter, please co	all:		
Lisa Thomas		904 541-8500 at ()		
Name	of Person	Area Code Daytime	: Telephone Number	
Enclosed is a check for	the 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 Certificate o Certified Co (additional cop	of Status & (3) py
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P.O. Box 63	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T	porations allahassee	1 ED 15 A 10: 26
Tallahassee,	FL 32314	2415 N. Monro Tallahassee, FL	2 Street, Suite 810 32303	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Praise House BBO 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 $\frac{03/26/2021}{1}$ and assigned Florida document number <u>L21000142851</u> 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) PO BOX 48063 Enter new mailing address, if applicable: JACKSONVILLE, FL 32247-8063 (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 , Florida City 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

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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>	Name	Address	Type of Action
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			□ Remove
			□ Change
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