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(Rec	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	

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## **COVER LETTER**

TO:

Registration Section

Div	ision of Cor	porations		
CHD IECT.		QUETTEER LLC		
SUBJECT:		Name of Lin	nited Liability Company	·
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		ANA FERNANDEZ		
		<del></del>	Name of Person	
		THE CROQUETTEER LI	LC	
			Firm/Company	
		331 IVY LANE		
			Address	
		WESTON, FL 33326		
			City/State and Zip Code	
		a.abreu.art@gmail.com	to be used for future annual report noti	tingtion)
For further in	formation co	oncerning this matter, please c	•	(D
ANA FERNA	ANDEZ		954 903-8127	
	Name of	Person	at () Area Code Daytim	c Telephone Number
Enclosed is a	check for th	e following amount:		
☐ \$25.00 F		■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg Div P.O	ling Address distration S dision of Co display Box 632' lahassee, F	lection orporations 7	Street Address: Registration Sec Division of Cor The Centre of T	porations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE CROQUETTEER LLC			
( <u>Name of the Limited Liab</u> (A Flor	oility Company as it now appears on our records.) ida Limited Liability Company)		-
The Articles of Organization for this Limited Liability	Company were filed on May 06, 2021	and a	issigned
Florida document number L21000212488			Č
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	mited liability company here:		
The new name must be distinguishable and contain the words "Li	imited 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 ADD	ORESS)		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)	<del></del>	<del></del>	<del> (1</del> \)
			`\\\$Z 
3. If amending the registered agent and/or register agent and/or the new registered office address here	red office address on our records, <u>enter the</u> :	name of the n	ew registe
Name of New Registered Agent:		=	:
New Registered Office Address:		24	<u>-</u>
	Enter Florida street address	<u></u>	<u> </u>
	, Florid	9	
	City	Zip Cod	٠

## 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.

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
AR	GABRIEL E FERNANDEZ	331 IVY LANE	
		WESTON, FL 33326	<b>■</b> Remove
MGR	ANA FERNANDEZ	331 IVY LANE	<b>≡</b> Add
		WESTON. FL 33326	□Remove
			□ Change
			Dbdd
			□Remove
			Change
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	July 17, 2021	2	
ffective date, if other than t	he date of filing: July 17, 2021	(optional)	
in effective date is listed, the date in	must be specific and cannot be prior to date of filir	ig or more than 90 days after filing.) Pursuant to 605.0	0207
ocument's effective date on the	Department of State's records.	y filing requirements, this date will not be listed	d as
record specifies a delayed effec	tive date, but not an effective time, at 12:01	a.m. on the earlier of: (b) The 90th day after	tha
is filed.	are date, our not all effective time, at 12.07	a.m. on the eartier of. (b) The 90th day after	ine
ated	2021		
	7		
The contract of	terum (		
1//200 1/	Signature of a member or authorized represen		

Typed or printed name of signee