L21000223037

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(Address)
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A. PARISHANI OCT 2 2 2023

COVER LETTER

TO:	Registration Section Division of Corpor		·	
SUBJE	ct: Fairy		CUTENIE LLC ted Liability Company	
The end	closed Articles of Am	endment and fee(s) are subr	nitted for filing.	2023 007 1 5
Please	return all corresponde	ence concerning this matter t	to the following:	-
			o the tone mig.	
		Deamni D	Name of Person	PH 12: 3
				7
			Firm/Company	
		1515 Candyo	e Street Address	
		Laheland	FU 33815 City/State and Zip Code	
	-	deconsidavis E-mail address: (t	COMOIL COM The black of future annual report notification in the company of the	fication)
For fun	ther information conc	erning this matter, please ca	dt:	
	Pomi D Name of Pe	OUIS	at (863) 398-4 Area Code Daytim	FIU 2 e Telephone Number
Enclose	ed is a check for the f	ollowing amount:		
□ \$ 2:	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

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

Zip Code

	!
Fairy Chic Charcuterie LLC (Name of the Limited Liability Company as it now appears on our records. (A Florida Limited Liability Company)	· 5
(Name of the Limited Liability Company as it now appears on our records. (A Florida Limited Liability Company)	PH 12:
	1.5
The Articles of Organization for this Limited Liability Company were filed on $05/13/90$	and assigned
Florida document number <u>L21000233337</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
Backyard PE LLC 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)	
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 agent and/or the new registered office address here:	he name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street address	
Flor	aida

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.

City

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
<u>AMB</u> R	Kenneth Davis Jr.	1515 Candyce St.	🗹 Add
		1515 Candyce St. Lakeland, FL 33815	Remove
			□Change
			2000 Add
			Remove
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<u></u>			r⊡Change ⇔ — □Add
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Effective date, if other (If an effective date is listed, the Note: If the date inserted document's effective date	ne date must be specific a Lin this block does no	and cannot be prior to of meet the applicat			iling.) Pursua	
he record specifies a The 90th day after			an effective tim	e, at 12:01 a	.m. on th	e earlier of
Dated <u>SPPtemb</u>	iera9	2023	-· ·			
	Signature of	a member or author	zed representative of a	ı member		
	Seomo	Typed or printed	5			