## 121000236010

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

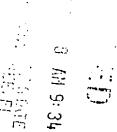


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JUTA O ZUZT



## Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

ENTITY NAME THE	SMOOTHIE BAR LLC
DOCUMENT NUMB	BER
	**PLEASE FILE THE ATTACHED AND RETURN**
xxxxxxx	Plain Copy
	Certified Copy
	Certificate of Status
	Certified Copy of Arts & Amendments
	Certified Copy of Arts & Amendments Complete File (Including Annual Reports)  Certificate of Status  Certificate of Status Reflecting:
	Certificate of Status
COUNTRY OF DESTI	Certificate of Status  Certificate of Status Reflecting:  **APOSTILLE' / NOTARIAL CERTIFICATION**
COUNTRY OF DESTIN	Certificate of Status  Certificate of Status Reflecting:  **APOSTILLE' / NOTARIAL CERTIFICATION**  WATION

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Smoothie Bar LLC				
(Name of the Limited Liability Company a (A Florida Limited Liabi	it now appears on our re ity Company)	ecords.)		
he Articles of Organization for this Limited Liability Company wer	e filed on <u>05/20/2021</u>	a	nd assi;	gned
orida document number L21000236010				
nis amendment is submitted to amend the following:				
If amending name, enter the new name of the limited liability	company here:			
moothie Bar At 426 LLC				
te new name must be distinguishable and contain the words "Limited Liability C	ompany," the designation	"LLC" or the abbrevia	tion "L.L	C."
nter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS)	- ·			
_				
nter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·		• • •
_			ر:)	
. If amending the registered agent and/or registered office add	esse on our reserve a	ntar the name of t		, voniet
gent and/or the new registered office address here:	ess on our records, <u>er</u>	nter the name or t	ις <del>μενι</del>	Tegise
			ယ	
Name of New Registered Agent:		nd		
New Registered Office Address:				
	Enter Florida street a	ddress		
		, Florida		
	City		Code	

## 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 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>	Address	Type of Action
<u>.</u>			□Add
			Remove
			Change
			□ Add
			□Remove
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			Петюvе
			□ Add
			□ Change

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ective	date, if other than the date of filing: (optional)  ve 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
ote: If	he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
cument	's effective date on the Department of State's records.
ecord s is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ited	6/7 2021
	6/7 2021. Danmato
	Signature of a member or authorized representative of a member
	Signature of a member of authorized representative of a member
	Pamela Matthews, Manager
	Typed or printed name of signee