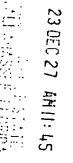
121000250925

Office Use Only



300420657943

12/27/23--01027--003 **50.00



COVER LETTER

TO: Registration Section Division of Corporations	4
SUBJECT: The Boardroom Hookah Barard Lourge LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Kinandra Nelson Name of Person	
Firm/Company	
1946 Baywind Court	
Tallahasel F1 32303 City/State and Zip Code	
E-mail address: (to be used for fundre annual report notification)	
For further information concerning this matter, please call:	
Kilandra Melson at (850) 591-0706 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Co (additional copy is enclosed)	of Status & -

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

Street Address:
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

23 OFC 25 (10)

The Knardroom Hookah Bar	ny as it now appears on our records.) Jability Company)
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Hability Company)
	5/20/2021
The Articles of Organization for this Limited Liability Company	were filed onand/assigned
Florida document number <u>L21000250925</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
424 Bar and Grill LLC	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1433 S. Monroe St.
(Principal office address MUST BE A STREET ADDRESS)	Taylahausee Fl 32301
	iana Danis Car
Enter new mailing address, if applicable:	1946 Kaywind Court
(Mailing address MAY BE A POST OFFICE BOX)	Tallahassel Fl 32303
D. If amounting the registered egent and/or registered office	address on our records enter the name of the new registered
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	dudress on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
The Manual Control of Manual C	Enter Florida street address
	Florida
	City Zip 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
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
		□Remove	
			□Change
			□Add
			□Remove
			□ Change
			□∧dd
			□Remove
			□Change
			□Add
			□Remove
			□Change

Effective date, if other than the date of filing: (optional)	
Effective date, if other than the date of filing:	
Effective date, if other than the date of filing:	
Effective date, if other than the date of filing:(optional)	
Effective date, if other than the date of filing:(optional)	
Effective date, if other than the date of filing:	
Effective date, if other than the date of filing:	
Effective date, if other than the date of filing:(optional)	
Effective date, if other than the date of filing: (optional)	<u> </u>
Effective date, if other than the date of filing: (optional)	
Effective date, if other than the date of filing: (optional)	
Effective date, if other than the date of filing: (optional)	
. Effective date, if other than the date of filing: (optional)	
Effective date, if other than the date of filing:(optional)	
	
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The cord is filed.	2 90th day after the
Dated Novimber 20 2023 Signature of a member of authorized representative of a member	
Signature of a member of authorized representative of a member	

COVER LETTER

TO: Registration So Division of Cor			
SUBJECT: The	Boardroom Hoo?	Cein Bar and Lited Liability Company	ourge LC
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Ki	Bandra Nelsu Name of Person	.^
		Firm/Company	
	1946 2	Daywind Court	
	Talla	City/State and Zip Code	2303
	H24bar. E-mail address: (1	arill a gmail. Code of the used for future annual report	COM rt notification)
For further information c	oncerning this matter, please ca		
Kiland Name o	ra Nelson Person	at (\$50)	591 - OT CC Paytime Telephone Number
Enclosed is a check for the	ne following amount:		
\$25.00 Filing Fec	☐ \$30.00 Filing Fee & Certificate of Status	\$55.00 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 Tallahassee, FL 32314

Street Address: 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

ARTICLES OF O	JRGANIZATION S
О	OF Control of the con
The Boardroom Hookah Bar (Name of the Limited Liability Compa (A Florida Limited I	OF ANIZATION Any as it now appears on our records.) Liability Company
The Articles of Organization for this Limited Liability Company	were filed on $\frac{5/28/202}{\text{and assigned}}$
Florida document number $\frac{121000250925}{}$.	
Florida document number VVI O 00 250 125	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
424 Bar and Grill 140.	
The new name must be distinguishable and contain the words "Limited Liabil	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1433 S. Monroe St.
(Principal office address MUST BE A STREET ADDRESS)	Taylohousee Fl 32301
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1946 Paywind Court Tallainassee Fl 32303
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registe
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip 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, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
		 	□Remove
			□Change
			□ Add
			□Remove
			□ Change
			□Remove
			□Change
			□Add
		□Remove	
		<u>-</u>	□Change
			□Add
			□ Remove
			□Change
			□Add
			□Remove
			□Change

 -	
	· · · · · · · · · · · · · · · · · · ·
Note: If the	date, if other than the date of filing: e 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 (3) the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the state on the Department of State's records.
the record specord is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	November 20, 2023
	Signature of a member of authorized representative of a member
	Kilandra Nelson Typed or brinted name of signee