## 121000 254874

(Re	questor's Name)	
(6.4)	(deno)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ru	siness Entity Nar	mel
(50	Siness Entity Hair	ne,
(Do	ocument Number)	<del></del>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

A. RIVERS
DEC 2 1 2021



200377651102

10/09/21/-01011--015 \*\*\*0.00

2021 DEC -9 PM 1: 13

## **COVER LETTER**

Division of Co			
WIF BRA	ANDS LLC		
SUBJECT:	Name of Lin	ited Liability Company	**************************************
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	TODD NEGOSHIAN		
		Name of Person	
	<del></del>	Firm/Company	
	246 TEMPLE LN		
		Address	
	Belleair Bluffs, FL 33770		
	negoshian@me.com	City/State and Zip Code	
	E-mail address: (	to be used for future annual report not	ification)
For further information	concerning this matter, please c	all:	
Todd Negoshian		813 956-8633 at ()	
Name	of Person	Area Code Daytin	ne 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 Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Se	ection

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

WTF BRANDS LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	***
The Articles of Organization for this Limited Liability Company v	were filed on 06/01/2021	and assigned
Florida document number 1.21000254874		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
NEGOSHIAN LLC		
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		<del> </del>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		202 08
Mading dadress MAT DE A TOST OF TICE BOXY		
B. If amending the registered agent and/or registered office a	ddress on our records, enter th	ne name of the new register
agent and/or the new registered office address here:	· <del></del>	7 05 T
		<b>A</b> 5
Name of New Registered Agent:		m
New Registered Office Address:		
	Enter Florida street address	
	. Flor	ida
<del></del>	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
			□∧dd
•			□Remove
			🗀 Add
		<del> </del>	□Remove
			□Change
<del></del>			□Add
			□Remove
			□Change
<del></del>			□Add
			□Remove
			□ Change
	-		□Add
			□Remove
			□Change
	<del> </del>		🖸 Add
			□Remove
			□ Change

					_
<del> </del>		· • • • • • • • • • • • • • • • • • • •	<u>.</u>		<del></del>
	<del></del>	<del></del>		<del></del>	
			<del> </del>		
			·		<del></del>
	<del>_</del>			<del></del>	
	<u>.</u>				
		- · · ·			<del></del>
				<u>.</u>	
		· <del></del> -	<del></del>	<del></del> .	
			-		<del></del>
	<del> </del>	·· ·		<del></del>	
					<del></del>
fective date, if other than the da in effective date is listed, the date must be ote: If the date inserted in this block cument's effective date on the Depa	does not meet the ap	plicable statutory	or more than 90 day filing requirement	(optional) is after filing.) Pursua ts. this date will no	nt to 605.0207 t be listed as
ecord specifies a delayed effective da	ate, but not an effecti	ve time, at 12:01	a.m. on the earlier	of: (b) The 90th of	day after the
is fileu.					
October 27	. 2021				
oted October 27					
oted October 27		authorized represen	tative of a member		

Filing Fee: \$25.00