## 121000347747

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TO PRUCE SEP 19 2021

## **COVER LETTER**

Registration Section

Division of Corporations

'TO:

SUBJECT:		a Desser Is LLC		
	Name of Lin	ited Liability Company		
		•		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
T	Bosen Color	Crt Tanner Name of Person		
		Resserts LLC		
		Firm/Company		
		deral Hw-j December		
	Bocc	Rection El 3343.  City/State and Zip Code	2	
	E-mail address: (	City/State and Zip Code  L Tanne ( b : Z  to be used for future annual report notifi	ication)	
For further information of	oncerning this matter, please c	all:	. ~	
Robert	÷	at (717) \$11 -	Telephone Number 75 FP -9	
	of Person	Area Code Daytime	Telephone Number	1 11 11 11 11 11 11 11 11 11 11 11 11 1
Enclosed is a check for t	he following amount:		m <sub>er</sub>	*****
☑ \$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 22 Certificate of Slatus & Certified Copy (additional copy is enclosed)	
Mailing Address Registration 1 Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	oorations allahassee Street, Suite 810	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

BCCQ Desserts LLC

(Name of the Limited Liability Company as it now appears on our records.)

(Name of the Limited Liability Compan (A Florida Limited Li	ability Company)	
The Articles of Organization for this Limited Liability Company of Florida document number 1000347747.	were filed on 02 Aug 65+ 6	2021 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<del></del>
(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 a agent and/or the new registered office address here:	ddress on our records, enter the n	ame of the new registered
Name of New Registered Agent:		<del>20</del> 8
New Registered Office Address:	Enter Florida street address . Florida	SEP -9
<del></del>	City	Zip Gode
New Registered Agent's Signature, if changing Registered Agent:		プラー
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete, accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and 1 o rovided for in Chapter 605, F.S.	im familiar with and Or, if this document is

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
AMBR	Robert Tanner	5500 NM. litarytrail	□Add
		Unit 429 Boca Katen FL	ZRemove
	units.	33496	□Change
MGR	Impeccas a Smoothers holdings LL	i 1200 N Federal Hwy	ZAdd
		Svite 200 Born Raton FL 33432	□Remove
			□Change
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