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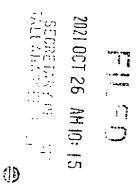
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## **COVER LETTER**

TO: Registratio Division of	n Section Corporations		
	FOOD BEARS LLC		
SUBJECT:	Name of Lin	aited Liability Company	
	•		
The enclosed Article	s of Amendment and fee(s) are sub	omitted for filing.	
Please return all corr	espondence concerning this matter	to the following:	
	JAVIER E GUZMAN VE	g ANCO	
	<del></del>	Name of Person	
	FAST FOOD BEARS LLO		
	Name of Limited Liability Company  nelosed Articles of Amendment and fee(s) are submitted for filling.  return all correspondence concerning this matter to the following:    JAVIER E GUZMAN VELANCO     Name of Persont		
	8350 NW 52ND TER STE	£ 301	
		Address	
	DOPAL, FL 33166		
		•	
			ication
For further informatic			
Javier E Guzman Vel	asco	,	
Nan	ne of Person		: Telephone Number
Enclosed is a check fo	or the following amount:		
■ \$25,00 Filing Fee	© \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	
<u>Mailing Ado</u> Registratic		Street Address: Registration Sec	
_	f Correspondions	Division of Cor	porations

214

Tallahassee, FL 32314

P.O. Box 6327

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

FILED

FAST FOOD BEARS LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on  $\frac{08/04/2021}{1}$ \_ and assigned Florida document number  $\frac{1.21000351506}{1.21000351506}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: NΑ The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 19370 COLLINS AVE, APT 1014 Enter new principal offices address, if applicable: SUNNY ISLES BEACH, FL 33160 (Principal office address MUST BE A STREET ADDRESS) 19370 COLLINS AVE, APT 1014 Enter new mailing address, if applicable: SUNNY ISLES BEACH, FL 33160 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: HIVE CONNECTION LLC Name of New Registered Agent: 19370 COLLINS AVE APT 1014 New Registered Office Address: Enter Florida street address SUNNY ISLES BEACH

#### 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.

Cin

Javier Guzman

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
AMBR	JOSE D MELENDEZ JANSEN	8350 NW 52ND TER STE 301	□Add
		DORAL, FL 33166	■Remove
			□Change
NA	NA	NA	□Add
			□Remove
NA	NA	NA	□Add
			□Remove
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cument's effective date on the Depa	rtment of State's records		•	
record specifies a delayed e	fective date, but no	t an effective tin	ne, at 12:01 a.m. on the	e earlier (
The 90th day after the record	is filed.			
nted OCTOBER 21TH	2021	·		
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Sig	nature of a member or auth	orized representative o	a member	
JAVIER E GUZMAN VEI		orized representative o	i a member	