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03/13/21--01041--004 **25.00

COVER LETTER

Division of Corpor			
SUBJECT: PEAK	L BOBA TEA	# SNACKS LLC red Liability Company	
The enclosed Articles of An	nendment and fee(s) are subm	nitted for filing.	
Please return all corresponde	ence concerning this matter t	o the following:	
	TIFFANY	HOANG. Name of Person	
	PEARL B	OBA TEA & SNAC	KS LLC
	11372 W	EST STATE RD 80	<u> </u>
	DAVI	E FLORIDA 3332 City/State and Zip Code	5
-	Typanyhoang 83	Baicloud, com the used for future annual report notification)	
For further information conc	erning this matter, please ca	II:	
TIFFANY Name of Pe	HOANG.	at (<u>954</u>) <u>326 352</u> Area Code Daytime Telepho	ne Number
Enclosed is a check for the f	ollowing amount:		
Ş⊈ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Sec	etion	Street Address: Registration Section	
Division of Corp		Division of Corporation	
P.O. Box 6327		The Centre of Tallahas.	see

Tallahassee, FL 32314

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2021 SEP 13 AM 8: 29

PEARL BOBA TEAL SNACKS LLCSECRETARY OF ST
(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 $09/09/2021$ and assigned
Florida document number <u>L 21000 357 G</u> .58
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:
(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 address on our records, enter the name of the new regis
agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
, Florida
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

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 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
MGR	THUẬN NGUYEN	37662 SAMANTHA DR	\MAdd
		STERLING HEIGHTS M	□Remove
		48310-3583	□Change
MGR TIFFANY H	TIFFANY HOANG.	5503 PAGEANTS PL	□Add
		MARGATE, FL, 33063	□Remove
			□Change
MGR	KRISTY NGUYEN.	11560 S Open Court	□Add
		Cooper City FL, 3300	【 □Remove
			□Change
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f an eff <u>Note:</u>	ive date, if other than the date of filing: OGO (optional) (optional) ective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
recor d is fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	09/09/2021
	Signature of a member or authorized representative of a member
	TIFFANY HOANG. Typed or printed name of signee

Filing Fee: \$25.00