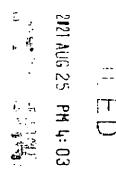
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## **COVER LETTER**

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Tallahassee, FL 32314

	Registration Se Division of Cor						
SUBJEC'		EAR CAFî, LLC					
SUBJEC	· ·	Name of Lin	nited Liability Company				
The enclo	sed Articles of	Amendment and fee(s) are sub-	omitted for filing.				
		ondence concerning this matter	S .				
		Benjamin Platt					
			Name of Person	<u> </u>	-		
		Tembo CPAs					
			Firm/Company		-		
		211 Anastasia Blvd.			r îz		
		····	Address		27		
		St. Augustine, FL 32080			2121 AUG 25		
	City/State and Zip Code			<del></del>	- , 5		
		sunbiz@tembocpas.com			<b>4</b> → <b>3</b>		
		E-mail address: (	to be used for future annual report notif	ication)	PH 4: 03		
For further	r information co	oncerning this matter, please c	alt:		03		
Amy Shin	no		904 501-7403				
	Name of	f Person	at () Area Code Daytime	Telephone Number	· · · · · · · · · · · · · · · · · · ·		
Enclosed i	s a check for th	ne following amount:					
Certificate of Status C			☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifica Certified	660.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
R D	Lailing Address egistration S Division of Co .O. Box 632	Section orporations	Street Address: Registration Sec Division of Corp The Centre of Ta	orations			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YESTERYEAR CAF®, 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 velocida document number $\frac{L21000376987}{L21000376987}$ .	were filed on 8/23/21	and assigned
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liabil	lity company here:	
YESTERYEAR CAFE, LLC		2121
he new name must be distinguishable and contain the words "Limited Liabilit	ty Company," the designation "LLC" or the a	bbreviation L.L.C."
nter new principal offices address, if applicable:		325
Principal office address MUST BE A STREET ADDRESS)		1 * 70
<del>.</del>		
		. 0
nter new mailing address, if applicable:		<del>ဖု</del> ယ
Mailing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registered office ac gent and/or the new registered office address here:	ddress on our records, <u>enter the nar</u>	ne of the new regist
Name of New Registered Agent:		<del> </del>
New Registered Office Address:	Enter Florida street address	
	, Florida	
<del> </del>	, riorida	Zin 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 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
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ffective date, if other than the an effective date is listed, the date mu sote: If the date inserted in this blocument's effective date on the D	ist be specific and cannot be prior lock does not meet the applica	able statutory filing req	an 90 days after fili uirements, this da	ng.) Pursua	ant to 605.03 of be listed
record specifies a delayed effective is filed.	ve date, but not an effective ti	me, at 12:01 a.m. on th	e earlier of: (b)	The 90th	day after tl
ated August 25	2021	·			
Bw Hatt	5				
C 70 1	Signature of a member or author				

Filing Fee: \$25.00