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A. RAMSEY JUL 12 2022

COVER LETTER

TO:

Registration Section

Division of Corporations						
	and Delivered, LLC					
SUBJECT:	Name of Lin	nited 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:				
	Madison Harrison					
	1, 2, 2, 2, 2	Name of Person				
		Firm/Company				
	5127 55th Street Circle	West				
		Address				
	Bradenton, FL 34210					
	anha mis sa 1315@sa sail sa	City/State and Zip Code				
	mharrison1215@gmail.cc	to be used for future annual report no	tification)			
For further information c	oncerning this matter, please c	all:				
Madison Harrison		941 7046676at ()				
Name o	f Person	Area Code Dayti	me Telephone Number			
Enclosed is a check for the	he 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)			
Mailing Addres Registration 9		Street Address: Registration S	ection			
Division of Corporations		Division of Co	Division of Corporations			
P.O. Box 632 Tallahassee, 1		The Centre of 2415 N. Monre	Tallahassee oe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2022 MAY -9 AM II: 05

Searched and Delivered LLC

(Name of the District Co	
(A Florida Limited Liability Co	ompany as it now appears on our records.) ited Liability Company)
The Articles of Organization for this Limited Liability Comp Florida document number L21000529728	pany were filed on 12/16/2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	liability company here:
Skyline Coffee Company, LLC	
he new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or the abbreviation "L,L,C,"
Enter new principal offices address, if applicable:	5127 55th Street Circle West, Bradenton, FL 34210
<u>Principal office address MUST BE A STREET ADDRESS</u>	<u> </u>
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	5127 55th Street Circle West, Bradenton, FL 34210
B. If amending the registered agent and/or registered offigent and/or the new registered office address here: Name of New Registered Agent:	fice address on our records, enter the name of the new regis
New Registered Office Address:	
•	Enter Florida street address
	, Florida
	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 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>	Name	<u>Address</u>	Type of Action
			□Add
			□Remove
		□Change	
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Effective date, if other than the fan effective date is listed, the date mus Note: If the date inserted in this bloocument's effective date on the Do	ock does not meet the appl	cable statutory filing	(optional) e than 90 days after filing.) requirements, this date v	Pursuant to 605.0207 (will not be listed as t
record specifies a delayed effective d is filed.	date, but not an effective	time, at 12:01 a.m. or	n the earlier of: (b) The	90th day after the
Dated April 30	2022	<u></u> .		
	1747			
	6	horized representative o	Čo mankau	
	Signature of a member or aut	nonveu representative o	i a member	