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02/28/22--01039--020 **25.00

2021 FEB 28 AM 7: 09
SECRETARY OF STATE

A. BUTLER MAR - 8 2022

COVER LETTER

TO: Registration Sect Division of Corpo					
SUBJECT: BOBABAE	TEAHOUSE, LLC				
		ted Liability Company			
The enclosed Articles of A	mendment and fee(s) are subr	nitted for filing.			
Please return all correspond	dence concerning this matter (to the following:			
	Corpora	ate Maintenance Le	ad		
		Name of Person			
	Processing Department				
Firm/Company					
	1450 Vassar St				
		Address			
		Reno, NV 89502			
	<u> </u>	City/State and Zip Code			
	E-mail address: (to be used for future annual report noti	fication)		
For further information co	ncerning this matter, please co	all:			
Processi	ng Department	at (800) 638-2320			
Name of		Area Code Daytim	e Telephone Number		
Enclosed is a check for th	e 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)		
Registra Division P.O. Bo	NG ADDRESS: stion Section of Corporations x 6327 ssee, FL 32314	STREET/COUR Registration Section Division of Corpor Clifton Building 2661 Executive Country Tallahassee, FL 3:	on rations enter Circle		

3

C

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED

2021 FEB 28 AM 7: 09

HOUSE, LLC SECRETARY OF STATE	
HOUSE, LLC TAIL AHASSEF, FI y as it now appears on our records.) ability Company)	
were filed on 01/28/22 and assigned	
lity company here:	
HOUSE LLC	
ry Company," the designation "LLC" or the abbreviation "L.L.C."	
2811 Tamiami Trail, Unit L	
Port Charlotte, FL 33952	
2811 Tamiami Trail, Unit L	
Port Charlotte, FL 33952	
ice address on our records, enter the name of the new	
New Registered Office Address: Enter Florida street address	
, Florida City Zip Code	
City Zip Code	

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 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

1

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Kristle Dang	2811 Tamiami Trail, Unit L	
		Port Charlotte, FL 33952	Remove
			☐ Change
		C Remove	
			☐ Change
			Add
		Remove	
			Add
			☐ Remove
			Change
		· · · · · · · · · · · · · · · · · · ·	D Add
			Remove
			□ Change
			Remove
			Change

If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing: N/ (If an effective date is listed, the date must be specific and cannot Note: If the date inserted in this block does not meet the document's effective date on the Department of State's to	(optional) be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 c applicable statutory filing requirements, this date will not be listed as records.
the record specifies a delayed effective date, to the 90th day after the record is filed.	but not an effective time, at 12:01 a.m. on the earlier of
Dated Feb. 23, 2022,	
Signature of a thember	or authorized representative of a member
	Kristle Dang

Page 3 of 3

Filing Fee: \$25.00