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(Document Number)
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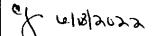
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COVER LETTER

TO: Registration Section Division of Corporations

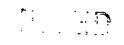
Tallahassee, FL 32314

	PIZZERIA 28 LLC					
Name of Limited Liability Company						
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Ken Barre					
		Name of Person				
	Flippers Pizzeria #28 LLC					
		Firm/Company				
	10832 Satellite Blvd					
		Address				
	Orlando, FL 32837					
		City/State and Zip Code				
	kbarre@flipperspizzeria.com					
	E-mail address: (to be used for future annual report noti	fication)			
For further information c	oncerning this matter, please ca	all:				
Ken Barre		407 852-9026 at ()				
Name o	f Person	Area Code Daytim	e Telephone Number			
Enclosed is a check for the	ne 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		<u>Street Address:</u> Registration Sec	ction			
Registration Section Division of Corporations		Division of Corporations				
P.O. Box 6327			The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



FLIPPERS PIZZERIA 28 LLC

2022 APR 28 PH 2: 17

(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 3/22/2022 _____ and assigned Florida document number _____L22000141565 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: FLIPPERS PIZZERIA #28 LLC 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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address ___, Florida ____ City

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
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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			□Remove
			□Change

Effective date, if other than the date of filing: [If an effective date, if other than the date of filing: [If an effective date is listed, he done must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 045:0207. Nate: If the date inserted in his block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The record 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 ord is filled. Dated April 25 2022 Signature of a filenber or authorized representative of a member					
Effective date, if other than the date of filing: [I an effective 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. State: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The coordinate of the 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 rd is filed. Dated April 25 2022					
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Signature of a member or authorized representative of a member	Oated	2022	·		
Signature of a member or authorized representative of a member					
Signature of a member of authorized representative of a member					
		argumure of a member of	annouzed representati	ive of a member	
		Typed or	printed name of signee		

Filing Fee: \$25.00