## 2200225675

(Reque	estor's Name)	<del>-</del> .
(Addre	ss)	
(Addre	ss)	<del></del>
(City/S	tate/Zip/Phone #	)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Name	)
(Docur	ment Number)	<u> </u>
Certified Copies	Certificates o	f Status
Special Instructions to Fili	ng Officer:	

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2023 FEB 27 AH 11: 20 RECEIVED

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( 2/28/2023

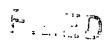
CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

Phone: 850-558-1500
ACCOUNT NO. : 12000000195
REFERENCE : 528264 7161018
AUTHORIZATION:
COST LIMIT : \$ 25.00
ORDER DATE : February 27, 2023
ORDER TIME : 10:28 AM
ORDER NO. : 528264-005
CUSTOMER NO: 7161018
DOMESTIC AMENDMENT FILING
NAME: JP FLARE HOOKAH LOUNGE LLC
EFFECTIVE DATE:
XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY
XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Alexxis Weiland EXT#

EXAMINER'S INITIALS:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2023 FEB 27 PM 2: 02

JP FLARE HOOKAH LOUNGE LLC		e e e e e e e e e e e e e e e e e e e
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our records.) inbility Company)	TALLSEE FL
The Articles of Organization for this Limited Liability Company	were filed on MAY 24, 2022	and assigned
Florida document number L22000225675		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the	ne 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 as agent and/or the new registered office address here:	ddress on our records, <u>enter the </u>	name of the new registered
Name of New Registered Agent:		<del></del>
New Registered Office Address:		
	Enter Florida street address	
	, Florida	Zip Code
	City	<i>⊔р ∟оае</i>

## 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 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

<u>Title</u>	Name	<u>Address</u>	Type of Action
AMBR	MATTHEW PATEL	3784 TAMPA RD., SUITE 2, OLDSMAR, FL 3467	7 □Add
			Remove
			□Change
MGR	JACQUELINE JODAH-PATEL	3784 TAMPA RD., SUITE 2, OLDSMAR, FL 3467	$\neg \dots$
		TO SOLE MEMBER	EChange
			🗀 Add
			DRemove
			_ Change
			□Add
			□Remove
		·	DChange
<u></u>	4		🗀 Add
			_ Remove
			_ Change
			□Add
			□Remove
			□ Change

REMOVE MATTHEW PA	ΓEL AS AUTHORI2	ZED MEMBI	ER		
CHANCE TITLE OF LAGG	WIELDIE 100 III B	. TC1 TO C	21 12 3 412 412 12		
CHANGE TITLE OF JACO	OELINE JODAH-P	ATEL TO S	OLE MEMBER		<del></del>
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			<del></del>		. <del></del>
				•	
		-			
ective date, if other than the effective date is listed, the date mu te: If the date inserted in this b nument's effective date on the D	st be specific and canno lock does not meet th	ot be prior to da ne applicable	ite of filing or more	(option than 90 days after fi equirements, this o	ling.) Pursuant to 605,020
cord specifies a delayed effectives filed.	ze date, but not an efi	fective time,	at 12:01 a.m. on	the earlier of: (b)	The 90th day after the
ed		23			
	00.70	)1./			

Filing Fee: \$25.00

Typed or printed name of signee