

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L22000236208

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((H22000229003 3)))



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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : INCFILE.COM LLC
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SOURBAN.STORE LLC

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JUL -7 2022

M. SOLOMON

Electronic Filing Menu

Corporate Filing Menu

Help

((H22000229003 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

((H22000229003 3))

SOURBAN.STORE LLC

(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 05/20/2022 and assigned Florida document number 1.22000236208

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

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:

7726 Winegard Rd. 2nd Floor #306

(Principal office address MUST BE A STREET ADDRESS)

Orlando, FL 32809

Enter new mailing address, if applicable:

7726 Winegard Rd. 2nd Floor #306

(Mailing address MAY BE A POST OFFICE BOX)

Orlando, FL 32809

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

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 Changing Registered Agent, Signature of New Registered Agent

((H22000229003 3))

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: (((H22000229003 3)))

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Melvin Adams	590 Mississippi Street	<input type="checkbox"/> Add
		Monticello, FL 32344	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
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