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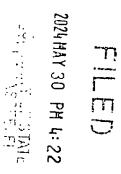
(Requestor's Name)	_
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(Document Number)	_
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95/30/24--01006--007 **25.00



COVER LETTER

TO: Registration Section Division of Corpo			
SUBJECT:\	EVLYS DOIN Name of Lim	C LATERING LL ited Liability Company	<u>C</u>
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	,	Name of Person 2 Options Firm/Company	
	<u>56 W 14</u>	St. Apt 205 Address	_
	Hialeah,	City/State and Zip Code	
	E-mail address: (1	OD . COM . To be used for future annual report notifications.	ation)
For further information con	ecerning this matter, please ca	all:	
JESUS Name of F	Person	at (<u>A54</u>) <u>SS1 - S3</u> Area Code Daytime T	S Z Z Celephone Number
Enclosed is a check for the	following amount:		
⊠ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

Mailing Address:
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

110

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.)	
(A Fiorida Limited I	Jability Company)	
The Articles of Organization for this Limited Liability Company	were filed on _06/10/2022	and assigned
Florida document number <u>L 22000766 192</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
AUIL AVENUE BAKERY LLC The new name must be distinguishable and contain the words "Limited Liabil		
The new name must be distinguishable and contain the words "Limited Liabil		
Enter new principal offices address, if applicable:	56 W 14 St.	APT 205
(Principal office address MUST BE A STREET ADDRESS)	56 W 14 St.	30/0
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	·	
B. If amending the registered agent and/or registered office a	ddress on our records, <u>enter the</u>	
agent and/or the new registered office address here:		202
		F 1
Name of New Registered Agent:		Δ –
M D 1 - 102 - 11		38
New Registered Office Address:	Enter Florida street address	
		Try 5
	, Floric	lans 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>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			Change
			□Add
			□Remove
		□Change	
		🗀 Add	
			□Remove
		[] Change	
			□Remove
			Change
			□Remove
			□Change

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
_	
_	
_	
_	
(If an effective Note: It	te date, if other than the date of filing: 5/16/2024 (optional) tive 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 (3 fithe date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as that is effective date on the Department of State's records.
the record ford is file	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 d.
Dated	5/16/2024
	Signature of a member or authorized representative of a member
	Typed or printed name of signee