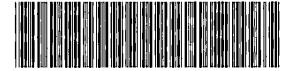
# 2000298612

(Requestor's Name)					
(Address)					
(Address)					
	_				
(Ci	ty/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
(Bu	usiness Entity Nam	e)			
(Do	ocument Number)				
Certified Copies	_ Certificates	of Status			
Special Instructions to	Filing Officer:				
		•			
J. HORNE					
	JUL	1 1 2022			

Office Use Only



600389189956

2022 JUL -8 AH II: 08 FILED

2022 JUL -8 PM 3: 30

RECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT	NO.	;	I2000000019	5
---------	-----	---	-------------	---

REFERENCE : 795554 7422869

AUTHORIZATION : Smell &

COST LIMIT : (\$ \script{\script{25}}.00

ORDER DATE : July 8, 2022

ORDER TIME : 2:36 PM

ORDER NO. : 795554-005

CUSTOMER NO: 7422869

------

### DOMESTIC AMENDMENT FILING

NAME: GRAHAM CRACKER PROPERTIES, 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:

# **COVER LETTER**

TO:

TO: Registration So Division of Co			
	racker Properties, LLC		
SUBJECT:			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Athena Ware		
		Name of Person	
	First American Exchange	Company	
	<del></del>	Firm/Company	
	333 W SANTA CLARA S	ST, SUITE 622	
		Address	
	2028 Shepherd Rd, #121,	Mulberry, FL 33860	
		City/State and Zip Code	
	bsr@bartsross.com		<del> </del>
For further information c	eoncerning this matter, please c	to be used for future annual report not all:	nireation)
Bart Ross		863 670-2055	
Name o	f Person		ne Telephone Number
Enclosed is a check for t	he 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 Address Registration S		Street Address: Registration Sc	ection
Division of C		Division of Co	
P.O. Box 632		The Centre of	
Tallahassee, l	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 JUL -8 AM 11: 08

GRAHAM CRACKER PROPERTIES, LLC

SECRETARY OF STATE ALLAHASSEE, FLORE (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The new name must be distinguishable and contain the	e words "Limited Liability Company,"	the designation "LLC" or the abbreviation	L.L.C."
Enter new principal offices address, if appl	licable:		
(Principal office address MUST BE A STRE	EET ADDRESS)		
	<del></del>		
Enter new mailing address, if applicable:			
	——————————————————————————————————————		•
willing allifuss wat by a pill liftii		<del></del>	
Muning address MAT BE A POST OFFIC	<u></u>		
Muning address MAT BE A POST OFFIC			
B. If amending the registered agent and/or	r registered office address on o	ur records, enter the name of the n	ew regis
B. If amending the registered agent and/or	r registered office address on o	ur records, enter the name of the n	ew regi
B. If amending the registered agent and/or agent and/or the new registered office addi	r registered office address on o	ur records, <u>enter the name of the n</u>	ew regi
B. If amending the registered agent and/or	r registered office address on o	ur records, <u>enter the name of the n</u>	ew regi
B. If amending the registered agent and/or	r registered office address on o ress here:  2028 Shepherd Rd, #121		ew regis
B. If amending the registered agent and/or agent and/or the new registered office additional Name of New Registered Agent:	r registered office address on o ress here:  2028 Shepherd Rd, #121	ur records, enter the name of the n	ew regis
	r registered office address on o ress here:  2028 Shepherd Rd, #121		ew regis

## 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
			⊡Add
			□Remove
			□Change
			□Add
			□Remove
			DAdd
			□Remove
			Change
			\ \ \ \ \ \ \ \ \
			Remove
			□Change
			☐Add
			□Remove
			□ Changa

			<u> </u>			
						<del></del>
-		<del> </del>	<del> · · · · · · · · · · · · · · · · · ·</del>			<u> </u>
_						<del></del>
						<del> </del>
<del></del>						<del></del>
_				<del></del> .		
_						<del></del>
				<del></del>	·	<del></del>
					<del>_</del>	
						<del></del>
(If an effect <u>Note:</u> If	e date, if other than the dive date is listed, the date must the date inserted in this blockt's effective date on the Dep	be specific and cannot lick does not meet the	applicable statu			
the record secord is	specifies a delayed effective	date, but not an effe	ctive time. at 12	:01 a.m. on the earlie	r of: (b) The 90th	day after the
Dated	JULY 8TH	- 20	22 .			
	S	Athena ignature of a member	Ware or authorized repr	esentative of a member		
	Athena Ware		·			
		Typed o	or printed name of	signee		<del></del>

Filing Fee: \$25.00