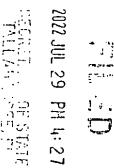
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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:



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A. BUTLER 0CT 2 4 2013

## · COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Butter Crust	Restauran- Name of Limited Li	+ Group, LLC ability Company	<u> </u>
The enclosed Articles of Amendment ar	d fee(s) are submitted	for filing.	
Please return all correspondence concer-	ning this matter to the	following:	
	Brianna	Telaman Name of Person	
	Buttero	YUST PIZZA Firm/Company	<u> </u>
	9 W Ste	ele St. Address	
<del></del>	Orlando, Cir	FL 32804 y/State and Zip Code	
<u> </u>	Manna @ F	Bytter crust. Corrused for future annual report notifica	ation)
For further information concerning this	matter, please call:		
Brianna Feldma Name of Person	<u>η</u>	at ( <u>-407</u> ) <u> </u>	977 Telephone Number
Enclosed is a check for the following a	mount:		
	Filing Fee & Cate 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 Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	<b>.</b>	Street Address: Registration Sect Division of Corp The Centre of Ta 2415 N. Monroe	orations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u>Butterur</u>	ust Restaurant Granza	166 64 1:27
( <u>Name of the Limite</u> )	d Liability Company as it now appears on our recor A Florida Limited Liability Company)	rds.)
The Articles of Organization for this Limited Lia	ibility Company were filed on 7/7/2	2 SFE, Fand assigned
Florida document number <u>L220003042</u>	<u>65</u> .	
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of (	the limited liability company here:	
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	<del></del>
(Principal office address MUST BE A STREET	ADDRESS)	<del></del>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u></u>	
B. If amending the registered agent and/or req agent and/or the new registered office address		r the name of the new registere
Name of New Registered Agent:	Jade Magnolia,	LLC
New Registered Office Address:	19 W Steele S Enter Florida street addre	? <del>+</del> .
	Orlando F	Slorida 32804
	viny	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

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

Title	<u>Name</u>	Address	Type of Action
MGR	Blue Gardeni	a, LLC 19 W Steele St.	🗆 Add
		orlando, FL 3280	YRemove
			Change
MGR	Jade Magnolia	, LLC 19 W Steele St.	XAdd
		Orlando, EL 3280	☐ Remove
			Change
		<u> </u>	□ Add
			□Remove
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fan effective date is Note: If the date	f other than the date of s listed, the date must be specified in this block doc tive date on the Department	ritie and cannot be prions s not meet the appli	cable statutory iiiii	(option nore than 90 days after it ng requirements, this o	ling.) Pursuant to 605.020
record specifies d is filed.	a delayed effective date.	but not an effective	time, at 12:01 a.m.	on the earlier of: (b)	The 90th day after th
Dated July	<u> 36</u>	2025	<u>)                                    </u>		
	Signan	ire of a member or aut	norized representative	e of a member	
		teidma Typed or prir			