## Florida Department of State Division of Corporati

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 : (855)330-1010 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

F '1	A 1 1			
Email	Address:			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MARMOLADE LLC

Certificate of Status Certified Copy Page Count 04 \$25.00 Estimated Charge

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OCT 27 2022

K. Brumbley

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Marmolade LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Compan Florida document number <u>L22000456555</u>	y were filed on 10/24/22	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
Marmolades LLC		
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or the a	obreviation "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 agent and/or the new registered office address here:	address on our records, enter the nan	ne of the new registered
Name of New Registered Agent:		77 77 77 77 77 77 77 77 77 77 77 77 77
New Registered Office Address:		2 60
	Enter Florida street address	- S

## 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.

Cay

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

or remov	ed from our records:			
MGR =	Manager			

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□Remove
			□ Change
		4	□Add
			□Remove
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(If an effective d <u>Note:</u> If the c	te, if other than the date of ate is listed, the date must be speci date inserted in this block does ffective date on the Departmen	fic and cannot be prior to not meet the applicab	date of filing or more	(options than 90 days after fili equirements, this da	ng.) Pursuant to 605.0207 (.
f the record speci ecord is filed.	fies a delayed effective date, b	ut not an effective tim	e, at 12:01 a.m. on	the earlier of: (b)	The 90th day after the
DatedC	October 27		_·		
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*******	Signatur	e of a member or authori	zed representative of	a member	<del></del>
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		Morgan Not Typed or printed	nume of signer		

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