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(shown below) on the top and bottom of all pages of the document.



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190 Phone : (844)449-3624 Fax Number : (512)597-0678

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

Email	Address:	
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KIMBERLYS COOKIES AND CATERING LLC

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APR 25 2024 T. LEMIEUX (3)

To: Page: 2 of 4

2024-04-24 12:52:45 UTC+14

18506176383

From: ZenBusiness User

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION



H24000148652 3

O	F	
Kimberlys Cookies and Catering LLC	سانو	ş
(Name of the Limited Liability Common (A Florida Limited)	ny as it now appears on our records.) Jability Company)	····
The Articles of Organization for this Limited Liability Company Florida document number 122000467196	were filed on 10/31/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Linbi	lity Company," the designation "LLC" or the	abbreviation "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 a agent and/or the new registered office address here:	address on our records, enter the na	me of the new register
agent analog the new registered orace address acre.		
Name of New Registered Agent:		D.5
New Registered Office Address:		
	Enter Florida street oddress	E

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.

City

If Changing Registered Agent, Signature of New Registered Agent

(3)

To:

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Hamending 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>	Name	Address	Type of Action
MGR	Kimberly Anderson	2240 Malibu Lake Circle 216	
		NAPLES, FL 34119	■Remove
		US	
MGR	Ryan Anderson	2217 NW 5th Place	
		Gainesville, FL, 32603	
		<u>CS</u>	
MGR	Ryan Anderson	352 SW 62nd Blvd apt 3	
		Gainesville, FL 32607	
		US	
			□Remove
			□ Change
			□ Add
			□ Remove
			□ Change
			DAdd
		<u></u>	□Remove
			ClChange

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ued						
record specifies a delayed effective is filed	e date, but not an	effective time,	at 12:01 a.m. on	the earlier of; (b)	The Outh day after	the
Tective date, if other than the an effective date is listed, the date must ote: If the date inserted in this blocument's effective date on the D	ock does not meet	r the applicable	statutory filing i	than 90 days after the equirements, this o	ling.) Pursuant to 605.0 fate will not be liste	0207 :d as
Tective date, if other than the	date of filing:			(optior	nal)	
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