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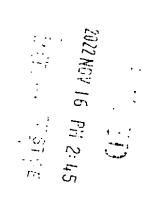
| (Requestor's Name) | | | | | |
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| (Address) | | | | | |
| (Address) | | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP WAIT MAIL | | | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| Certified Copies Certificates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

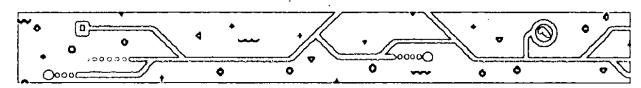


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zenbusiness

Nov 10, 2022

Thank you,

Naketa Ford ZenBusiness Customer Success

Florida Secretary of State Division of Corporations 2415 N Monroe St Suite 810 Tallahassee, FL 32303

RE: Benny's LLC

To Whom It May Concern:

Attached please find the executed <u>Articles of Amendment</u>, for the above referenced. Please review and file the attached document on a routine basis.

Once completed please forward the filed confirmation or notification to the address listed below:

ZenBusiness Inc Attention: Naketa Ford 336 E. College Ave, Suite 301 Tallahassee, FL 32301

If you have any questions, please feel free to contact me at 844-493-6249 or at fulfillment@zenbusiness.com.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 NOY 16 PH 2: 45 BENNY'S LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 11-07-2022 and assigned Florida document number $\underline{1.22000478285}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Benji's LLC The new name must be distinguishable and contain the words "Limited Liability 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

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 |
|--------------|-------------|-------------|----------------|
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| If amending any other information | n, enter change(s) here: | (Attach additional s | heets, if necessary.) | |
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| Effective date, if other than the da (If an effective date is listed, the date must be | e specific and cannot be prior to | | | |
| Note: If the date inserted in this block document's effective date on the Department. | c does not meet the applical artment of State's records. | ole statutory filing requ | airements, this date will | not be listed as the |
| he record specifies a delayed effective d ord is filed. | ate, but not an effective tim | ic, at 12:01 a.m. on the | earlier of: (b) The 90 | Oth day after the |
| Dated November 10 | 2022 | * | | |
| /s/ Benjamin Bauriedl | | | ··· | |
| Si, | gnature of a member or author | ized representative of a n | nember | |
| Benjamin Bauriedl | Typed or printed | | | |

Filing Fee: \$25.00