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A. RIVERS MAY - 5 2023

COVER LETTER

Hot Mess Hot Sauce LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Mariana Rubio Name of Person Hot Mess Hot Sauce Firm/Company 9709 Hammocks Blvd, Apt 103 Address Miami, FL 33196 City/State and Zip Code info@hotmesshotsauces.com E-mail address; (to be used for future annual report notification) For further information concerning this matter, please call: Daytime Telephone Number Name of Person Enclosed is a check for the following amount: **■ \$25.00** Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address: Street Address:

Registration Section **Division of Corporations** P.O. Box 6327

TO:

Registration Section **Division of Corporations**

Tallahassee, FL 32314

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hot Mess Hot Sauce LLC						
(Name of the Limited Liability Company as it now a (A Florida Limited Liability Com	appears on our records.) cany)					
The Articles of Organization for this Limited Liability Company were filed or	on November 18, 2022 and assigned					
Florida document number L22000493680						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liability compa	ny here:					
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:	2023					
(Mailing address MAY BE A POST OFFICE BOX)	FC = 11					
B. If amending the registered agent and/or registered office address on						
agent and/or the new registered office address here:	ي ښ					
	表					
Name of New Registered Agent:						
New Registered Office Address:						
	er Florida street address					
	, Florida					
City	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 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>	<u>Address</u>	Type of Action
MGR	Edgardo J. Rubio	9709 Hammocks, Apt 103	≡ ∧dd
		Miami, FL 33196	□Remove
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Effective date, if other than the		0.01	(opt	
f an effective date is listed, the date mus Note: If the date inserted in this bloom	ock does not meet the	e applicable statutory		
document's effective date on the Do	epartment of State's	records.		
				1) 77 001 1 0 1
e record specifies a delayed effective rd is filed.	date, but not an effe	ective time, at 12:01	a.m. on the earlier of: (b) The 90th day after the
February 26	202	3		
Dated February 26	,	·		
Dated				
Dated	Signature of 9 member		ntative of a member	