# Electronic Filing Cover sheet

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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

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

Empil.	Address:			

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WALK-ON'S PROCESSING, LLC

Certificate of Status	0
Certified Copy	1
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# **COVER LETTER**

TO: Registratio Division of	n Section Corporations	
	CON'S PROCESSING, LLC	
SUBJECT:	Name of Lin	nited Liability Company
The enclosed Article	s of Amendment and fee(s) are sub	omitted for filing.
Please return all corr	espondence concerning this matter	to the following:
	Madison Baker	
		Nume of Person
	Walk-On's Enterprises Fra	anchising, LLC
		Firm/Company
	2 Ravinia Drive, Ste 505	
	-	Address
	Atlanta, GA 30346	
		City/State and Zip Code
	mbaker@walkons.com	(to be used for future annual report notification)
For further informati	on concerning this matter, please o	•
Madison Baker		470 751-0480 at ()
Na	me of Person	Area Code Daytime Telephone Number
Enclosed is a check t	for the following amount:	
□ \$25.00 Filing Fe	e ☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)  ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Division of P.O. Box	on Section of Corporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

WALK-ON'S PROCESSING, LLC

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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ALLEN 2 PA 1:31

(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 12/28/2022 Florida document number L22000536267 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company 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) 15965 Redington Drive Enter new mailing address, if applicable: Redington Beach, FL (Mailing address MAY BE A POST OFFICE BOX) 33708 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 Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

Enter Florida street address

, Florida \_

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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	i, enter change(s) here.	Allega Gazaniana Brace	ia, y necessary.y	
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Effective date, if other than the da (If an effective date is listed, the date most be Note: If the date inserted in this block document's effective date on the Department.	does not meet the applicable	ate of filing or more than 90 statutory filing requirer	(optional) ) days after filing.) Pure nents, this date will	suant to 605.0207 (3)(b) not be listed as the
ne record specifies a delayed effective de ord is filed.	ate, but not an effective time,	at 12:01 a.m. on the car	lier of: (b) The 901	th day after the
Dated November 12				
Made	son Baker			
Sig	nature of a member or authorize	d representative of a meml	oer	<del></del>
Madison Baker, Administra	ative Assistant			
	Typed or printed na	ame of signee	· · · · · · · · · · · · · · · · · · ·	

Filing Fee: \$25.00