## 123000063622

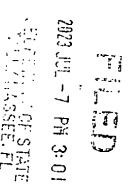
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100411498151

07/07/23--01807--013 \*\*30.80



Y. SCOTT AUG 12 2023

## **COVER LETTER**

Registration Section Division of Corporations

TO:

	S MOBILE BARTENDING LI	LC		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Sharneese Jackson			
		Name of Person		
		Firm/Company		2023
	1937 WEST 4TH STREET			2023 JUL -
		Address	1.0 1.0	-1 1
	Jacksonville, FL 32209		17 S	PH 3: 0
		City/State and Zip Code	FL	0
	Fii.treats00@gmail.com	to be used for future annual report noti	(T)	
For further information c	oncerning this matter, please c		incation,	
Sharneese L Jackson	_	904 697-7058		
Name o	f Person	Area Code Daytim	ne Telephone Number	_
Enclosed is a check for the	ne following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.40 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Cop (additional copy	f Status & Dy
Mailing Address Registration S Division of C P.O. Box 632	Section orporations 7	Street Address: Registration Se Division of Co The Centre of T	rporations l'allahassee	
Tallahassee, I	FL 32514	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

( <u>Name of the Limited Liability Company</u> (A Florida Limited Liab	as it now appears on our records.) dity Company)	
The Articles of Organization for this Limited Liability Company we Florida document number <u>L23000063622</u> .	re filed on February 3, 2023	and assigned
Inter new mailing address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  Inter new mailing address, if applicable:		
A. If amending name, enter the new name of the limited liability	v company here:	
Fii Treats LLC		
he 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:	; <del></del>	2023
Principal office address MUST BE A STREET ADDRESS)	<u> </u>	
-		1 (1.25)
	59	177
Inter new mailing address, if applicable:		1
Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
B. If amending the registered agent and/or registered office add gent and/or the new registered office address here:  Name of New Registered Agent:	lress on our records, enter the na	me of the new reg
New Registered Office Address:		
	Enter Florida street address	
	Florida _	
	City	Zıp Code

## New Registered Agent's Signature, if changing Registered Agent:

CHATRATE MODILE DADTEMBING LLC

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with to 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 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 or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Act
			□Add
			□Remove
			☐Change
			□Add
			□Remove
			Change
			□Add
			2023 JUL -
			SSEE STATE  Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
		<del> </del>	□Remove
			□Change

	_ <u>-</u>		
	•		
			<del></del>
		_2_	
		123 Ji	
			<del>- 0   -</del>
	75.7 70.7	F	
	20 G	<u> </u>	<u></u>
		<i>د</i> ئ ہِ۔	النت
	m		
			—
fective date, if other than the date of filing:	optiona (optiona )	I) 12.) Pursuant	to 605
ite: If the date inserted in this block does not meet the applicable statutory filir cument's effective date on the Department of State's records.			
edition serieure date on the Department of State s records.			
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m.	on the earlier of: (b)	The 90th da	w afte
is filed.	,		
led July 2 . 2023.			
Sharanana Janahan			
Signature of Ayrember or authorized representative	e of a member		

Filing Fee: \$25.00