## L73000068644

| (Re                     | equestor's Name)   |           |
|-------------------------|--------------------|-----------|
| (Ac                     | ddress)            |           |
| (Ac                     | ddress)            |           |
| (                       | ,                  |           |
| (Ci                     | ty/State/Zip/Phone | e #)      |
| PICK-UP                 | ☐ WAIT             | MAIL      |
| (Bu                     | usiness Entity Nam | ne)       |
|                         |                    |           |
| (Do                     | ocument Number)    |           |
| Certified Copies        | _ Certificates     | of Status |
| Special Instructions to | Filing Officer:    |           |
|                         |                    |           |
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FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-624

| Wunderbar Café LLC L23000068644 BUSINESS ( Name)                 | Document #   |
|--|--|
| Walk in  | Pick up time   |
| Mail out   | Will wait  |
| Photocopy  | Will wait  Will wait  Will wait  |
| Certified Copy (please stamp each page)                          | SE ST  |
| Certificate of Status  | 141  |
| NEW FILINGS  | <u>AMMENDMENTS</u>   |
| Profit Not for Profit Limited Liability Domestication Other CORP | X_AmendmentResignation of R.A. Officer/DirChange of Registered AgentDissolution/WithdrawalMergerConversion |
| OTHER FILINGS  | REGISTERATION/QUALIFICATIONS   |
| Annual Report  | Foreign filing Limited Partnership   |
|  | Reinstatement  |

## **COVER LETTER**

| TO: Registration Se<br>Division of Cor |   |   |                  |   |
|--|---|---|------------------|---|
|  | r Cafe LLC                                      |   |                  |   |
| SUBJECT:                               | Name of Lim                                     | ited Liability Company  |                  |   |
| The enclosed Articles of               | Amendment and fee(s) are sub                    | mitted for filing.  |                  |   |
| Please return all correspo             | ondence concerning this matter                  | to the following:   |                  |   |
|  | Nicolas Neuhierl                                |   |                  | _                                       |
|  | <del> </del>                                    | Name of Person  | <del></del>      |   |
|  | Wunderbar Cafe LLC                              |   |                  |   |
|  |   | Firm/Company  |                  | ଜୁ                                      |
|  | 8400 Island Palm Circle                         |   |                  | 3 APR                                   |
|  | <del> </del>                                    | Address   |                  | 至 2 1                                   |
|  | Orlando, Florida 32835                          |   |                  | APR 24 PH                               |
|  | info@wunderbarjuice.con                         | City/State and Zip Code   |                  | 2023 APR 24 PH 12: 34 SHALL AHASSEE, FL |
|  | E-mail address: (                               | to be used for future annual report notif                           | ication)         | 14.2                                    |
| For further information of             | concerning this matter, please c                | all:  |                  |   |
| Aicha Neuhierl                         |   | 407-922-480   | )9               |   |
| Name o                                 | of Person                                       | at ()   | Telephone Number | r                                       |
| Enclosed is a check for the            | he following amount:                            |   |                  |   |
| ■ \$25.00 Filing Fee                   | ☐ \$30.00 Filing Fee &<br>Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified        | ite of Status &                         |
| Mailing Address Registration           | Section   | Street Address:<br>Registration Sec                                 |                  |   |
| Division of C<br>P.O. Box 632          |   | Division of Corp<br>The Centre of Ta                                |                  |   |
| 1 .O. DOX 032                          | - ·   | The Centre of Ta  |                  |   |

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Wunderbar Cafe LLC  |   |                          |
|---|---|--------------------------|
| ( <u>Name of the Limited Liability Compa</u><br>(A Florida Limited I  | ny as it now appears on our records.)<br>liability Company) |                          |
| The Articles of Organization for this Limited Liability Company  L23000068644                                       | were filed on February 07, 2023                             | and assigned             |
| Florida document number L23000068644  |   |                          |
| 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 Liabil  | ity Company," the designation "LLC" or the                  | he abbreviation "L.L.C." |
| Enter new principal offices address, if applicable:   |   |                          |
| (Principal office address MUST BE A STREET ADDRESS)   |   | <u> </u>                 |
|   |   | 3 1                      |
|   |   | 24<br>24                 |
| Enter new mailing address, if applicable:   |   | SSS                      |
| (Mailing address MAY BE A POST OFFICE BOX)  |   | ms v                     |
|   |   | 7 3 3 Y                  |
| 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                           | name of the new register |
| Name of New Registered Agent:   |   |                          |
| New Registered Office Address:  |   |                          |
| <del></del>   | Enter 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 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                                  |
|--------------|--------------------|---------------------------------------|---|
| MGR          | Chris M, Hernandez | 8218 Via Bella Notte Dr.              |   |
|              |                    | Orlando, FL 32836                     | Remove  |
|              |                    |                                       | Change  |
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|   |                   |                   |                  |                    | SEC.             | 2023 APR                              |             |
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| ective date, if other than the d<br>effective date is listed, the date must b | ate of filing:    | annot be prior to | date of filing o | or more than 90 da | (optional)       | oursuant to                           | o 605.020   |
| te: If the date inserted in this bloc<br>nument's effective date on the Dep   | k does not mee    | et the applicat   | ole statutory f  | iling requireme    | nts, this date w | ill not be                            | : listed a  |
| union 3 creenve date on the Bep   | artificial of Sta | io o rodoras.     |                  |                    |                  |                                       |             |
| cord specifies a delayed effective s filed.                                   | date, but not ar  | n effective tim   | e, at 12:01 a.:  | m. on the earlie   | r of: (b) The    | 90th day                              | after the   |
| ed April 11th   |                   | 2023              |                  |                    |                  |                                       |             |
|   | /                 | Lodes Name        | <u></u>          |                    |                  |                                       | _           |
|   | //                | / V               | <del>. ,</del>   | tive of a member   |                  |                                       |             |