L23000116249

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(C	ity/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
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(B	usiness Entity Name)	<u>.</u>
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Certified Copies	Certificates	of Status
		
Special Instructions to Fil	ing Officer:	
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Office Use Only



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SECRETARY OF STATE





FLORIDA DEPARTMENT OF STATE Division of Corporations

November 8, 2023

SUNSHINE

CORRECTED
Please Allow For
Same File Date

SUBJECT: THE CUP AND CREAM COMPANY, LLC

Ref. Number: L23000116249

We have received your document for THE CUP AND CREAM COMPANY, LLC. However, the document has not been filed and is being returned for the following:

The name of the entity cannot include "Company." This word/abbreviation is readily associated with or is commonly used to denote another type ofentity. Please amend your document throughout accordingly. As of August 17 2023, "Co" and "Company" are clearly defined in Florida Statutes 607.0401 as a corporate indicator. In Florida Statutes 605.0112 (d) a limited liability company's name may not contain language statingor implying that the limited liability company is connected with a state or federal government agency or a corporation or other entity chartered under the laws of the United States. As this is listed in the Statutes, a limited liability company cannot have the words "Co" or "Company" unless

the name of the limited liability company uses the phrase "&/And Co" or "&/And Company" as it indicates there are more "associates/partners".

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham Regulatory Specialist III Director's Office

Letter Number: 023A00025974

X E C E I V E D

www.sunbiz.org

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 11/7/2023	<u> </u>	⇔WALK I
FNTITY NAME The (Cup and Cream Company,	LLC
NIIII NAIL		
DOCUMENT NUMBE	R	
	PLEASE FILE THE A	TTACHED AND RETURN
xxxxxxx	Plain Copy	
	Certified Copy	
	Certificate of Status	
	Certified Copy of Arts & : Certificate of Good Standing	
	APOSTILLE' / NOT	ARIAL CERTIFICATION
COUNTRY OF DESTIN	IATION	
NUMBER OF CERTIFI	CATES REQUESTED	
TOTAL OWED \$25		ACCOUNT #: I20160000072
		ERTH
Please call Time as	t the above number kor anu	issues or concerns. Thank you so much!

COVER LETTER

	Registration Se Division of Cor			
4:115 1112C		AND CREAM COMPANY, L	LC	
SUBJEC	.1:	Name of Lim	ited Liability Company	
The encle	osed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please ret	turn all correspo	indence concerning this matter	to the following:	
		Jermaine Allen		
			Name of Person	
		Shutts & Bowen LLP		
			Firm Company	
		525 OKEECHOBEE BLV	D. STE 1100	
			Address	
		West Palm Beach, FL 334	91	
		Jallen@shutts.com	City State and Zip Code	
			to be used for future annual report notifi	cation)
For furth	er information c	oncerning this matter, please ca	nll:	
Jermaine	Allen		561 650-8554	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed	is a check for th	ne following amount:		
€ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres		Street Address:	
	Registration S Division of C		Registration Sec	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE CUP AND CREAM COMPANY, LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records. nited Liability Company)	ι)
The Articles of Organization for this Limited Liability Com- Florida document number <u>L23000116249</u>	pany were filed on March 13, 2023	and assigned
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited	liability company here:	
The Boundless Helpers, LLC		
he new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	No Change	2028 SEC:
<u>Principal office address MUST BE A STREET ADDRES</u>	<u></u>	
Inter new mailing address, if applicable:	No Change	7 AN B
Mailing address MAY BE A POST OFFICE BOX)		m 6
 If amending the registered agent and/or registered of gent and/or the new registered office address here: 	fice address on our records, <u>enter t</u>	he name of the new registo
Name of New Registered Agent: No Chang	<u></u>	
New Registered Office Address:	Enter Florida street address	
	, Flo	rida 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>	Name	Address	Type of Action
	No Change	No Change	⊑Add
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Dated							
Dated November 14			(4	W	/4)		

Filing Fee: \$25.00