L23000135103

(Red	questor's Name)	
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Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer.	
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Office Use Only



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A. PARISHANI OCT 2 2 2023

COVER LETTER

TO: Registration S Division of Co			,
Big Top A	dventures LLC	,	20
SOBJECT.	Name of Lim	nited Liability Company	2023 f c." 1 6
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	- 16 Pit
Please return all correspondence	ondence concerning this matter	to the following:	й
	Philip Jones		<u>ယ</u> ယ
		Name of Person	
	/dba Crave Hot Dogs & Bl	BQ	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	376 Cedarville Road		
		Address	
	Ilion, New York 13357		
		City/State and Zip Code	
	prjones1975@yahoo.com	to be used for future annual report not	· Ctivay
For further information of	concerning this matter, please c	·	meanon
Philip Jones		315 272-8920 at ()	
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 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 Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Jability Company)	
he Articles of Organization for this Limited Liability Company	were filed on 03/16/2023	and assigned
Florida document number L23000135103		1.03
'his amendment is submitted to amend the following:		on and
A. If amending name, enter the new name of the limited liab	ility company here:	P.1 5.
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" of	or the abbreviation L.L.C."
Enter new principal offices address, if applicable:	684 US HIGHWAY 441, Unit A	514
Principal office address MUST BE A STREET ADDRESS)	Lady Lake, FL 32159	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter tf</u>	he name of the new regis
Name of New Registered Agent:		<u>.</u>
New Registered Office Address:	Enter Florida street address	
	, Flor	rida
	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>	Address	Type of Action
MGR	Amanda S Jones	376 Cedarville Road, Ilion, NY 13357	≣∧ dd
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Control of Control of the data of fillings	(optional)
ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of fi	iling or more than 90 days after filing.) Pursuant to 605.0
te: If the date inserted in this block does not meet the applicable statut tument's effective date on the Department of State's records.	ory filing requirements, this date will not be fisted
cord specifies a delayed effective date, but not an effective time, at 12:	01 a.m. on the earlier of: (b) The 90th day after to
s filed.	
October 8 2023	
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