L23000156813

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COVER LETTER.

TO: Registration Sec Division of Corp			
SUBJECT: Che-	C DNYX The	Sweet and Sted Liability Company	Savory Chef LL
The enclosed Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
	ndence concerning this matter	·	
	<u>Jerri</u>	Name of Person	
	Chef Onyx	the Sweet and Firm/Company	d Savory Chef Lu
	6549 T	rixy St Address	
	Jackson	City/State and Zip Code	219
	Sweet and E-mail address:	Savory 6.7 @ 91 to be used for figure annual report nown	mail·com
For further information co	oncerning this matter, please ca		
Jerri C Name o	Y Darcon	at (Area Code) 536	-2658 Telephone Number
Name o	reism	Area Code 17dynnie	reignone Number
Enclosed is a check for the	ne 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 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Chef Onyx Th	e Sweet a	ind Sovo	repulsa	PH12-102-C
(Name of the Limited (A	Liability Company as it n Florida Limited Liability C	iow appears on our (Company)	records.)	DV preserve
The Articles of Organization for this Limited Liab Florida document number <u>L230015</u>	ility Company were fil <u>66</u> 13	led on <u>D3</u> 2	8/23	and assigned
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of th	e limited liability cor	mpany here:		
The new name must be distinguishable and contain the word	s "Limited Liability Comp	pany," the designation	"LLC" or the abbro	eviation "L.L.C."
Enter new principal offices address, if applicab	le:		·	
(Principal office address MUST BE A STREET)	<u> 4DDRESS)</u>			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BC	<u></u>			
B. If amending the registered agent and/or reg agent and/or the new registered office address l		on our records,	enter the name	of the new registered
Name of New Registered Agent:			· 	
New Registered Office Address:		Enter Florida street	address	
			, Florida	
	Cuy	1,		Zip Code
NO DESCRIPTION OF THE PROPERTY				

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	Aja Jackson	1727 Reats Rd	🗆 🗆 Add
		Jacksonville, Fl	E Remove
		39208	□Change
AMBR	Jerri Orr	1787 Keats Rd	Mdd
		Jacksonville, FI	□Remove
		39208	□Change
			🗀 Add
			□Remove
			□ Change
			□Add
			□Remove
			□Add
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	ve date is fisted, the date must be sp he date inserted in this block d	pecific and cannot be prior to da	te of filing or more than 90 day statutory filing requiremen	es after filing.) Pursuant to 605,0207 ts, this date will not be listed as
<u> Sote:</u> If t	s effective date on the Departi			
Note: If the document of the second space of t		e, but not an effective time,	at 12:01 a.m. on the earlier	of: (b) The 90th day after the
Note: If the following specific specified is filed.		e, but not an effective time,	at 12:01 a.m. on the earlier	of: (b) The 90th day after the
Note: If the document of the record spread is filed.	opecities a delayed effective date	e, but not an effective time, and a second s		of: (b) The 90th day after the

Typed or printed name of signee