L23000205753

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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COVER LETTER

TO:

Registration Section Division of Corporations

engueen, INTEON	ATIONAL EGGROLLS,	11.0		
SOBJECT: INTEXTO	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:		
	Corpor	ate Maintenance Le	ad	
		Name of Person		
	Processing Department			
		Firm/Company		
	1450 Vassar St			
	Address			
		Reno, NV 89502		
	<u> </u>	City/State and Zip Code		
		. E D C	•	
For further information e	n-mail address: (to be used for future annual report notif	(Cation)	
ror idiner invitation e	oncerning and matter, predict c	ui).		
Process	ing Department	at (800) 638-2320		
Name o	f Person	Area Code Daytime	: Telephone 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)	
Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURI Registration Sectio Division of Corpor Clifton Building 2661 Executive Ce	n ations	

Tallahassee, FL 32301

TO: PHYSICAL: Dept. of State

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

MAILING: Dept. of State

Division of Corporations

Corporate Filings P.O. Box 6327

Tallahassee, FL 32314

FROM: Inc Authority, LLC

1450 Vassar St Reno NV 89502 (800) 638-2320 (775) 329-0852

DATE: Friday, June 16, 2023

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

• Articles of Amendment

For: INTERNATIONAL EGGROLLS, LLC

We have included payment in the amount of \$25.00 for the following fees:

• Filing Fee

We have included one original and one copy.

If there are any questions, please call 800-638-2320

Please return the file stamped copy of Amendment to Articles of Organization to the address below:

Processing Department 1450 Vassar St Reno NV 89502

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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²⁰²³ JUN 27	PH 5: 21		

		2023 JUN 27 PH 5: 21
	ONAL EGGROLLS, LLC	1
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our records Limited Liability Company)	Will Day
		re- In the
The Articles of Organization for this Limited Liability Co	ompany were filed on 04/26/23	and assigned
Florida document number L23000205753		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	PESS)	
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regist		, enter the name of the new
registered agent and/or the new registered office addi	ress here:	
M. CM. D. C. LA		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres:	•
	Flo	orida
	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_	MARIANNE VALENZO	.256_W_Pentstemon_Ct	
		Beverly Hills	☐ Remove
		FL, 34465	Change
MGR_	Marianne J Valenza	256 W Pentstemon Ct	
		Beverly Hills	Remove
		FL, 34465	☐ Change
			□ Add
			Remove
			☐ Change
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Page 3 of 3

Filing Fee: \$25.00