orda Department of State Division of Corporations corronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ARIMIR SERVICES GROUP LLC

Account Number : 120200000022

: (305)298-6579

Fax Number : (305)643-5225

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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BAKED 561 LLC

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S. ROBERTS

MAY 23 2023

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Help

ARTICLES OF AMENDMENT 1423000 18992 3

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BAKED 561 LLC		;			
(Name of the Limited)	Liability Company	y as it now at	POSETS OIL OUT T	ecot(qrl)	
(2)		annity Compe	11.57		
The Articles of Organization for this Limited Liab	ility Company v	vere filed or	04/28/2023	! !	and assigned
Florida document number L23000211033		;			
Flouda document number	· ·	·			
This amendment is submitted to amend the follow	ng:	ì			
	i	:	h awas		
A. If amending name, enter the new pame of the	re muited framin	<u>ку сошрав</u> :	y nere:		
The new name must be distinguishable and contain the wor		•		1 1	
Enter new principal offices address, if applicab	le:	1445	n. Cong my Beac	ress AVE	AUC
(Principal office address MUST BE A STREET	ADDRESS)	Dela	an Brac	h + L - 3	3445 है
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B. If amending the registered agent and/or reg	istered office ac	ddress on o	ur records, <u>e</u>	nter the nam	e of the new registered
agent and/or the new registered office address	here:				
	1 1				
Name of New Registered Agent:	CAROLY	N TUN	101/		
	1445 N.	CONGE	444 A110	~100	
New Registered Office Address:	יא באיזו	Enter	r Florida street o	ddreu	
ė ;				1 1	33445
-	rece	M Bei	30r	_, Florida	Zip Cods
		City			Δp Coas
New Registered Agent's Signature, if changing Re-	istered Agent:			1	•
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the recompany has been notified in writing of this ch	and complete p red agent as pr gistered office a	performand rovided for	e of my dutie in Chapter (es, and I am ; 505, F.S. Or,	amiliar with and if this document is

If Changing Registered Agent, Signature of New Registered Agent

or remove	ng Authorized Person(s) autho d from our records:	rized to ma	anage, enter the title, name, and addre	ss of each person being adder
MGR = 1	Manager Authorized Member			
Title	Name		Address	Type of Action
MGR	DIANA GROW	1	18304 181ST CIRCLE SOUTH	□ Add
			BOCA RATON, FL 33498	Remove
		:		☐ Change
MGR	CAROLYN TUNON		13796 KAISER TRL	≅Add
		; .	DELRAY BEACH, FL 33484	Remove
				☐ Change
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D. If amending any other information, enter change(s) here:	(Attach additional sheets, if necessary.)	
		
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he record specifies a delayed effective date, but not an effective time, a ord is filed.	at 12:01 a.m. on the earlier of: (b) The 90th d	ay after the
Dated MAY,16 2023		
Trap!	; ;	
an mature ded member or authorized	representative of a member	_
JUAN TUNON		