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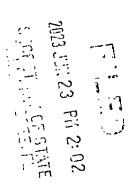
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Certified Copies Certificates of Status
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Y. SCOTT |AUG - 5 2023

COVER LETTER

	egistration Sec ivision of Corp						
erm meen	Candy Buffet Lady, LLC						
SUBJECT	Name of Limited Liability Company						
The enclos	ed Articles of z	Amendment and fee(s) are sub-	mitted for filing.				
Please retu	rn aff correspoi	ndence concerning this matter	to the following:				
		Amy Ponce					
			Name of Person				
		Candy Buffet Lady, LLC					
			Firm Company	(2 52			
		638 NW 38th Terrace		2023 JI S.J.C.T., L.	779		
			Address				
		Deerfield Beach, FL 33442	2	23 P			
		amyponce815@gmail.com E-mail address: 0	City/State and Zip Code to be used for future annual report notific	75 2			
For further	information co	oncerning this matter, please or	•				
Amy Pone	ee		561 716-4082				
	Name of	Person		Telephone Number			
Enclosed i	s a check for th	e following amount:					
≅ \$25.00) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &		
R D P	lailing Address egistration S livision of Co .O. Box 632' allahassee, F	section orporations 7	Street Address: Registration Sect Division of Corp The Centre of Ta 2415 N. Monroc Tallahassee, FL	orations Hahassee Street, Suite 819	0		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Candy Buffet Lady, LLC	
(<u>Name of the Limited Liability Comps</u> (A Florida Limited	any as it now appears on our records.) Liability Company)
he Articles of Organization for this Limited Liability Company	were filed on May 08, 2023 and assigned
lorida document number <u>L23000224614</u> .	
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liah	pility company here:
The Joy of All Trades, LLC	
he new name must be distinguishable and contain the words "Limited Liabi	ility Company," (he designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) . If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, enter the napoe of the new regis
Name of New Registered Agent:	····
New Registered Office Address:	Enter Florida street address
	, Florida

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
		-	
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			Change
			□Add
			□Remove
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effective date is listed, the date must be specific and	g:
cord specifies a delayed effective date, but not s filed.	t an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after th
June 19	2023
ed	· //) ·
/lm,	member or authorized representative of a member
Signature of a	member or authorized representative of a member