L23000 246635

(Re	equestor's Name)	_
(Ac	ddress)	
•	,	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(D.	min and Franks, Married	
(Bi	usiness Entity Name)	
(De	ocument Number)	
Certified Copies	Certificates of	Status
	_	
Special Instructions to	Filing Officer:	
		,

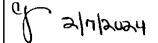


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4357-524-2976

Office Use Only



COVER LETTER

TO:

	egistration Se ivision of Cor			
eun men		II & Company LLC		
SUBJECT		Name of Lim	ited Liability Company	
The enclos	ed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	ırn all correspo	ndence concerning this matter	to the following:	
		Neal T Bailey II		
			Name of Person	
		Emerald Goose LLC		
			Firm/Company	
		174 Watercolor Way, Suite	e 103 # 231	
		· · · · · · · · · · · · · · · · · · ·	Address	
		Santa Rosa Beach, FL		
			City/State and Zip Code	
		32459		A Charles and
line Guelan	information o	n:-mail address; to	to be used for future annual report no	шысанонт
		oncerning this matter, prease co		
Neal T Ba			423 244-5133 at ()	
	Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is	s a check for th	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)
	Tailing Addres		Street Address: Registration S	ection
D	ivision of C	Corporations	Division of Ce	orporations
	.O. Box 632 fallahassee, l		The Centre of 2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303



December 14, 2023

NEAL TONY BAILEY, II 174 WATERCOLOR WAY SUITE 103 #231 SANTA ROSA BEACH, FL 32459

SUBJECT: NEAL BAILEY II & COMPANY LLC

Ref. Number: L23000246635

We have received your document for NEAL BAILEY II & COMPANY LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is L21000137090.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

www.sunbiz.org

Letter Number: 923A00028565

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2024 JULI 22 PM 3: 38

Neal Bailey II & Company LLC

(Name of the Limit	ed Liability Company as (A Florida Limited Liabili	it now appears on o	ur records.)	
	(7, 1, 7, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	is a surface,		•
The Articles of Organization for this Limited Li	ability Company were	filed on <u>05/03/20</u>	23	and assigned
Florida document number L23000246635	·			
This amendment is submitted to amend the follo	wing.			
A. If amending name, <u>enter the new name of</u>	fthe limited liability (company here:		
Frozen Spoon DSD LLC				
The new name must be distinguishable and contain the w	ords "Limited Liability Co	ompany," the designa	tion "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applic	able:			
Principal office address MUST BE A STREE	T ADDRESS)	<u> </u>		
Enter new mailing address, if applicable:				
• • • • • • • • • • • • • • • • • • • •				
Mailing address MAY BE A POST OFFICE	<u> </u>			
B. If amending the registered agent and/or r igent and/or the new register <u>ed office addres</u>		ess on our record	s, <u>enter the nam</u>	e of the new regist
igent and/or the new registered office address	is nere.			
Name of New Registered Agent:				
New Registered Office Address:				
		Enter Florida str	eet address	
			, Florida	Zip Code
	(City		Zip Code
New Registered Agent's Signature, if changing b	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>	Name	Address	Type of Action
			[]Change
		*	
			□Remove
			□Change
		[I] Add	
			□Remove
			□Change
			[]Add
		[]Remove	
		□Change	
		□Add	
		[]Remove	
		□Change	
			□Add
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		<u> </u>	□lChange

•		
Effective date (If an effective date Note: If the date document's effective date the record specific cord is filed.		
		
_		
_		
_		
(If an effect Note: If	late, if other than the date of filing:	7 (3)(the
ecord is filed	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the	
Dated	05 January 2024	
	Signature of a member or authorized representative of a member	
	Neal T Besiles II	

Filing Fee: \$25.00