L23000468263

(Requestor's Name)	
(Address)	
(Address)	
(123,333)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
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COVER LETTER

TO: Registration So Division of Con			
our IFO	JOHNNY'S HUNG	GRY HOAGIES #1, LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
		E. SCOTT GOLDEN	
		Name of Person	
		GOLDEN LAW	
		Firm/Company	·
	3	107 Stirling Road, Suite 201	
		Address	-
	Fe	ort Lauderdale, Florida 33312	
		City/State and Zip Code	
		golden@goldenlawfl.com	······································
		to be used for future annual report	notification)
For further information	concerning this matter, please c	all:	
E. SCOT	Γ GOLDEN	954 at ()	764-6766
Name (of Person	Area Code Da	aytime Telephone Number
Enclosed is a check for t	the following amount:		
■ \$25.00 Filing Fee	S30.00 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)
<u>Mailing Addre</u> Registration		Street Addres Registration	
Division of O	Corporations	Division of	Corporations
P.O. Box 63			of Tallahassee
Tallahassee.	TL 04014	2410 IN. MIC	onroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JOHNNY HUNGRY	HOAGIES #1, L	.LC	
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appea lability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Company	were filed on	October 11, 2023	and assigned
Florida document number L23000468263			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company h	<u>ere</u> :	
JOHNNY'S HUNGRY HOAG	GIES #1, LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the	designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Timepar office marcis most be histrately mbress			
			20 2
			023 875
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			2
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our	records, <u>enter the nar</u>	ne of the new regist
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flo	orida street address	
		, Florida	
	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
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
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fective date, if other than the d n effective date is listed, the date must be te: If the date inserted in this bloc cument's effective date on the Dep	ate of filing: be specific and cannot be prior ck does not meet the applic	cable statutory filing re-		
ecord specifies a delayed effective	date, but not an effective t	ime, at 12:01 a.m. on th	he earlier of: (b) The S	90th day after the
s filed.				
November 14	2023			
November 14	. 2023			
ted	2023 - 2023 ignature of a member or auth	Told-	member	

E. 00400