

Florida Department of State
Division of Corporations
Electronic Filings Sheet

L23000499259

Please print this page and use it as a cover sheet to type the tax and number (shown below) of the type of document being filed.

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To: Division of Corporations
Fax Number: (850)617-6181

From: Account Name: REGISTERED AGENTS INC
Account Number: 1700900000001
Phone: (307)200-2803
Fax Number: (813)436-5206

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MIG RESIGN
THE BOUGIE BACKPACKER LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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FILED
2024 JUL 26 AM 3:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

2024 JUL 26 PM 4:09

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

K. SALY
JUL 29 2024

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

The Bougie Backpacker LLC

(Name of the Limited Liability Company as it now appears on our records,
(A Florida Limited Liability Company))

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 11/02/23 and assigned Florida document number L23000499259.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

7901 4th St. N Suite #22350

(Principal office address MUST BE A STREET ADDRESS)

St. Petersburg, FL 33702

Enter new mailing address, if applicable:

7901 4th St. N Suite #22350

(Mailing address MAY BE A POST OFFICE BOX)

St. Petersburg, FL 33702

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida 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.

II 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Arvind Ramamoorthy	1168 SILVER ST.	☐ Add
		UNION CITY, CA 94587	☒ Remove
			☐ Change
AMBR	MATT, NICOLETTE	144 WISTERIA ROAD	☐ Add
		ST. AUGUSTINE, FL 32086	☒ Remove
			☐ Change
AMBR	Nicolette Kintz	7901 4th St. N Suite #22350	☒ Add
		St. Petersburg, FL 33702	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2024 JUN 26 AM 3:43
Change
Add
Remove
Change

FILED

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

2024 JUL 26 AM 3:43
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TALLAHASSEE

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E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated July 26, 2024

Red in purple

Signature of a member or authorized representative of a member

Robin Jones

Typed or printed name of signee

Filing Fee: \$25.00