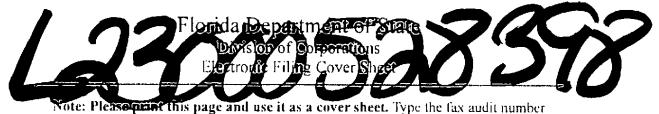
1/8/24, 4:47 PM

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

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

Email.	āddress:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ONLYSNACKS LLC

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Help

T. LEMIEUX JAN 1 0 2024

	COVER LETTER			
	on Section of Corporations			
ONL	YSNÄCKS LLC			
SUBJECT:	Name of Limited Liability Company			
The enclosed Articl	es of Amendment and foe(s) are submitted for filing.			
Please return all con	respondence concerning this matter to the following:			
	Cheyenne Moseley			
	Name of Person			
	Legalzoom.com, Inc.			
	Firm/Company			
	101 N Brand Bivd 11th Ft			
	Address			
	Glendale, CA 91203			
	City/State and Zip Code			
	CLASSICCARWASHORLANDO@GMAIL.COM			
	E-mail address: (to be used for future annual report notification)			
For further informat	tion concerning this matter, please call:			
Cheyenne Moseley				
	art () at () area Code Daytime Telephone Number			

Enclosed is a check for the following amount:

□ 525.00 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 tadditional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Cliffon Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ONLYSNACKS LLC					
(Name of the Limi	ted Linhility Compa (A Florida Limited)	iny as it now appears on Liability Company)	our records.)	 	
The Articles of Organization for this Limited L Florida document number <u>L23000528398</u>	and assigned				
This amendment is submitted to amend the foll-	owing:				
A. If amending name, enter the new name o	f the limited liab	ility company here:			
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the design	ation "LLC" or the abbre	viation "L.L.C."	
Enter new principal offices address, if applic	able:	12728 West Colonial Dr.			
(Principal office address MUST BE A STREE	Winter Garden, FL 3	4787			
			_		
Enter new mailing address, if applicable:		12728 West Coloniał Dr.			
(Mailing address MAY BE A POST OFFICE	BOX)	Winter Garden, FL 34787			
B. If amending the registered agent and/	'ar russtered al	Fire uddress on our	ragueds onto the	nome of the part	
registered agent and/or the new registered of	Tice address here	E:	records, enter the	e name of the new	
Name of New Registered Agent:	Caleb E. Cline			**	
New Registered Office Address:	12728 West Co	lonial Dr.		-	
		Enter Florida st			
Winter Garden			, Florida	7	
New Registered Agent's Signature, if changing b	Registered Agent:	Сцу		Zip Code	
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as regibeing filed to merely reflect a change in the company has been notified in writing of this	er and complete stered agent as p registered office	performance of my oprovided for in Chap	luties, and I am fam ter 605, F.S. Or, if t	iliar with and his document is	

Page 1 of 3

Caleb E. Clinc

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
AMBR	Caleb E. Cline	12728 West Colonial Dr. Winter Garden, FL 34787	5
			■ Add
			Remove
			D Change
AMBR	SHELBY R. LAFUZE		Add
		109 S BOYD ST., APT. 207 WINTER GARDEN, FL 34787	
			Aéd
			Remove
			Change
			D Add
			🗖 Remove
			🛘 Change
			Add
			Remove
			☐ Change
			_□ Remove
			Cl Charm

To:

Page 3 of 3

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