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(((H24000204165 3)))



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Division of Corporations

Fax Number : (850)617-6383

From

Account Name : ZENBUSINESS INC. Account Number : I20230000190 Phone : (844)449-3624 Fax Number : (512)597-0678

\*\*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/MG RESIGN VENDIN' BROS LLC

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## 2024-06-12 08:03:17 UTC+14

18506176383

From: ZenBusiness User H24000204165 3

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Vendin' bros LLC  (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	<u></u>	
(A Florida Limited Liability Company)		
The Articles of Organization for this Limited Liability Company were filed on 11/29/2023  Florida document number L23000531580	and ass	igned
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 th	ne abbreviation "L.	LC."
Enter new principal offices address, if applicable:		
Enter new principal offices address, it appreasue.		
(Principal office address MUST BE A STREET ADDRESS)		
(Principal office address MUST BE A STREET ADDRESS)		( <sub>b</sub> )
(Principal office address MUST BE A STREET ADDRESS)		(p
(Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:	F : : : : : : : : : : : : : : : : : : :	GD
(Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:	r'	<i>(</i> )
(Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:		Trepiste
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		Fregiste
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  3. If amending the registered agent and/or registered office address on our records, enter the new mailing address.		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the n		
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  3. If amending the registered agent and/or registered office address on our records, enter the nagent and/or the new registered office address here:		

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

- Page: 3 of 4 2024-06-12 08:03:17 UTC+14 18506176383 From: ZenBusiness User
H24000204165 3
Hamending 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

To:

<u>Title</u>	Name	Address	Type of Action
AMBR	noerys gonzalez	1680 lindley st	<b>≣</b> Add
		west palm besch, FL 33407	□Remove
		US	
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is. It amending any other habiti	nation, enter change(s) here: (Attach additional sheets, if necessary.)	
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W-PA-201-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		
<ul> <li>(If an effective date is listed, the date mi</li> </ul>	te date of lifting:	to 605.0207 (3); be listed as the
the record specifies a delayed effecti seord is filed	ive date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day	r after the
Dated June 11th	2024	
	Franco Guglislmucci Signature of a member of authorized representative of a member	
***************************************	Signature of a member of authorized representative of a member	
Franco Guglielmucci		
	Typed of printed name of signee	<del>D-d-d</del> -