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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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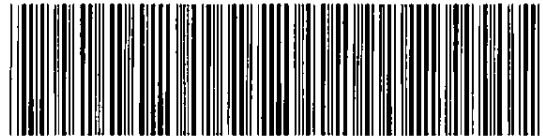
(Business Entity Name)

(Document Number)

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: III of Shells LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

David Branda

Name of Person

III of Shells LLC

Firm/Company

3599 NW Federal Highway

Address

Jensen Beach, Florida 34957

City/State and Zip Code

franchise@islandvibesbar.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph Reizer

Name of Person

at (732) 637-2904
Area Code Daytime Telephone Number

Enclosed is a check for the 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)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

III of Shells LLC

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

The Articles of Organization for this Limited Liability Company were filed on 12/18/2023 and assigned
Florida document number 1.23000555909

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 "L.L.C." or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET 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 name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Anton D. Smith, Esq.

New Registered Office Address:

2128 Okeechobee Blvd

Enter Florida street address

West Palm Beach

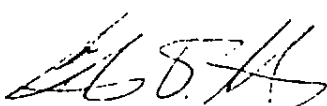
Florida 33409

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>	<u>Address</u>	<u>Type of Action</u>
AP	Paul Christoff	1000 SE LETHA CIRCLE APT 1	<input type="checkbox"/> Add
		STUART, FL 34994	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Joseph Reizer	2177 SW CAPE COD DR	<input checked="" type="checkbox"/> Add
		Port St Lucie Florida 34953	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Alyssa Damiano	2177 SW CAPE COD DR	<input checked="" type="checkbox"/> Add
		Port St Lucie Florida 34953	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Ricardo Riviera	3286 SE Carration Avenue Apt. 105	<input checked="" type="checkbox"/> Add
		Stuart, Florida 34997	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Anton D. Smith	2128 Okeechobee Blvd	<input checked="" type="checkbox"/> Add
		West Palm Beach, Florida 33409	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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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.

Dated November 11, 2024



David Branda

Filing Fee: \$25.00