

L24000076024

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Amend

DEC 06 2024

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GOOMBAAH PIZZAIOLA, 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:

RICHARD HOLDRIDGE
Name of Person

GOOMBAAH PIZZAIOLA, LLC
Firm/Company

742 FULLER AVE S.
Address

LEHIGH ACRES, FL 33974
City/State and Zip Code

INFO@239GOOMBAAH.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RICHARD HOLDRIDGE at (239) 896-4277
Name of Person 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

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2024 NOV -5 PM 4:23
TALLAHASSEE, FL

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

GOOMBAY PIZZAIOSO, 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 2/12/2024 and assigned
Florida document number LA 24000076024

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:

(Principal office address MUST BE A STREET ADDRESS)

850 LAFAYETTE ST
CAPE CORAL, FL 33904

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

742 FULLER AVE S
LEHIGH ACRES, FL 33974

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:

RICHARD HOLDRIDGE

New Registered Office Address:

742 FULLER AVE S

Enter Florida street address

LEHIGH ACRES

City

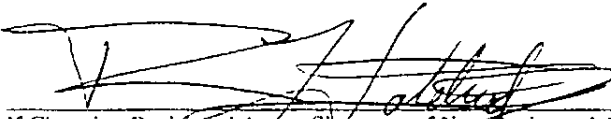
Florida

33974

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

[illegible]

[illegible]

(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)

Dated OCT 24th 2024

RICHARD HODRIDGE

Typed or printed name of signee