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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190 : (844)449-3624

; (512)597-0678 Fax Number

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

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From: ZenBusiness User

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VI:DIECT.	Piknic Grou	ıp L.L.C.					
SUBJECT:		Name of Limited Liability Company					
		Amendment and fee(s) are sub	-				
		Jonathan Taboada					
Name of Person					-		
ZenBusiness INC							
	Firm/Company				-		
336 E. College Ave Suite 301			m	26			
			Address		ECK.	2024 SEP 24	بالمتارسة
		Tallahassee, FL 32301				EP 2	A E
City/State and Zip Code fulfillment@zenbusiness.com			ASSE		1 1 1		
			to be used for future annual report notifi	cation)	TIS TIS	PM 4: 08	
For further i	nlormation c	oncerning this matter, please c	all:		177 b	0	
c/o ZenBus	siness TNC		844 493-6249				
	Name of	f Person	Area Code Daytime	Telephone Number	<u> </u>		
Enclosed is	a check for th	re 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 Fi Certified Certified (additional	te of Sta Copy	lus &	

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

To:

2024-09-25 07:10:27 UTC+14 18506176383 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Piknic Group L.L.C.			
(Name of the Limited Liability Compa (A Florida Limited	nny as it now appears on our records. Liability Company)	.)	
The Articles of Organization for this Limited Liability Company Florida document number 1.24000122085	were filed on	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	6278 N Federal HWY 24		
Principal office address MUST BE A STREET ADDRESS)	Fort Lauderdale, FL 33308	024 8EG	
	Broward County US		
Enter new muiling uddress, if applicable:	6278 N Federal HWY 24	24 P	
Mailing address MAY BE A POST OFFICE BOX)	Fort Lauderdale, FL 33308		
	Broward County US		
3. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter t</u>	he name of the new regist	
			
New Registered Office Address:	Enter Florida street address		
		rida	
	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.

or removed	Authorized Person(s) auth from our records:	2024-09-25 07:10:27 0 10÷14 185 norized to manage, <u>enter me inde, name, an</u>	06176383 From: ZenBusines on adoress of each person being added
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To:

From: ZenBusiness User

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