## LZ4000131407

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: "FREE Amond entity originally Filed in error."
<u>3 ( )</u>
<u>μες Σ</u> ≥ 1014

Office Use Only



000423179170

04/26/24

\* Funds not reak

2024 APR 26 PM 12: 40

## ARTICLES OF AMENDMENT • TO ARTICLES OF ORGANIZATION OF

The Original Mustard Seed BBOUE INC LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	Limited Limitiny Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on <u>03-19</u>	~ 2024 and assigned
Florida document number <u>L2400013140</u>	<u>.l</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	_;·
The acidian muchood of	seed RRDHF 11	11 C or the abbreviation "El-C"
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation	
Enter new principal offices address, if applicable:		- <del> </del>
(Principal office address MUST BE A STREET ADDR	(ESS)	32 on 1
		<u> </u>
		25. IS
Enter new mailing address, if applicable:		
_	<u></u>	• • •
(Mailing address MAY BE A POST OFFICE BOX)		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street	address
		, Florida
<del></del>	City	Zip Code
iew Registered Agent's Signature, if changing Registered	1 Agent:	
hereby accept the appointment as registered agent		n. I further curse to comply with
the state of the second of the second conference of the second conferen	omplete performance of my div	ues, ana i am iaminar wun ana 👚
rovisions of all statutes relative to the proper and ex ccept the obligations of my position as registered as eing filed to merely reflect a change in the registere ompany has been notified in writing of this change.	rent as provided for in Unaple	r 000, r.s. Or, ij inis aocumeni is
	If Changing Registered Agent, Sig	nature of New Danistaned Agent

If amending Authorized Person(s) authorized t	O manage enter the title name.	
or removed from our records:	o manage, enter the title, name, and address of each person	being added

MGR =	Manager	
	Authorized	Member

Title	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
<del></del>			□Add
			□ Remove
			□Change
			DAdd
			□Remove
			□Change
			———— □Add
			□Remove
		<del></del>	
<del></del>	<del></del>		
			DRemove
			☐ Change
	<del></del>		□∧dd
	t		□Remove
		<u></u>	□Change

4/25/24.	2.12	Dit
** Z.1/ Z**.	0.33	TIVE

			ere (unach adalla	nal sheets, if necessary.)	
					<del></del>
<del></del>					
<u></u>					<u></u>
<del></del>					
					<del></del>
<del></del> -				<del></del>	<del></del>
<del></del>			·		<del></del>
<del></del>					<del></del>
					<del></del>
			<u> </u>		
<u> </u>					
II CHECHYE GAE G	other than the date o	wifin and connor by one	38 to dista of Glove as		
121 11 010 0010	nserted in this block doo we date on the Departme	es not meet me appi	icabic statutory filing	requirements, this date w	fursion to 605,0207 (3 fill not be listed as th
· milen a citet	ve date on the Departm	em of smic 2 record	s.		
cord specifies	delayed effective date, i	but not an effective	time, at 12:01 a.m. or	the earlier of: (b) The	90th day after the
s filed.					The same of the same
d //-	25-2024				
. •		·	' 2		
	147				
	Roll Till Signatur	the plust	f		

Filing Fee: \$25.00