

To:

Page: 1 of 4

2024-08-06 10:55:03 UTC-14

18506176393

From: ZenBusiness User

8/7/24, 3:51 PM

Division of Corporations

H24000263318 3

L24000263318 11

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000263318 3))



H2400026331834803

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To:

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

2024 AUG -6 AM 3:34
FILED
TALLAHASSEE, FLORIDA

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

Email Address: _____

RECEIVED
2024 AUG -6 AM 9:25
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ORGANIZED CHAOS STRATEGIES LLC

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K. SALY

AUG - 7 2024

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Corporate Filing Menu

Help

H24000263318 3

To:

Page: 2 of 4

2024-08-06 10:55:03 UTC-14

18506176393

From: ZenBusiness User
H24000263318 3

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Organized Chans Strategies LLC

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

FILED
2024 AUG -6 AM 3:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 8/21/2024 and signed
Florida document number 174000136011

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Mi Café - Premium Artisan Coffee LLC

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)

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:

New Registered Office Address:

Enter Florida street address

Florida

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

H24000263318 3

To:

Page: 3 of 4

2024-08-06 10:55:03 UTC-14

16306176383

From: ZenBusiness User

H240000263318 3

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>
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JULIA HASSETT, CLERK

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