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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Registration So Division of Co			•
Pompano I	Pickle, LLC		
SUBJECT:	Name of Lin	nited Liability Company	···-
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Emily Wehr		
		Name of Person	
		Firm/Company	
	2824 ne 36th st		
	Accepte	Address	
	Ft. lauderdale, Florida 333	City/State and Zip Code	
	Emily@wehrjohnson.com	City/State and Zip Code	
		to be used for future annual report notif	ication)
For further information c	oncerning this matter, please c	all:	
Emily Wehr		417 619-6167 at ()	
Name o	f Person	Area Code Daytime	: Telephone Number
Enclosed is a check for the	ne 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 Fec, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	porations allahassee : Street, Suite 810

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pompano Pickle, LLC			
(Name of the Limited Liability Company as it now (A Florida Limited Liability Com	appears on our records.) ipany)		
The Articles of Organization for this Limited Liability Company were filed Florida document number 1.24000141994	on March 22, 2024	and ass	igned
This amendment is submitted to amend the following:	٠		
A. If amending name, enter the new name of the limited liability compa	any 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)		2024 17.5	
			•
Enter new mailing address, if applicable:		<u> </u>	•
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office address on agent and/or the new registered office address here:	our records, enter the	name of the ne	w register
Name of New Registered Agent:			
New Registered Office Address:	nter Florida street address		
	, Florid	la	
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>	Address	Type of Action
MGR	Scott Bodenweber	1153 N. Rio Vista Blvd	= Add
		Ft. Lauderdale, Florida 33301	□Rеточе
MGR	Holly Bodenweber	1153 N. Rio Vista Blvd	= Add
		Ft. Lauderdale, Florida 33301	□Remove
			□ Add
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ffectiv	re date, if other than the date of filing:
an effe	tive 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 (
	f the date inscrted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to nt's effective date on the Department of State's records.
	,
record	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
d is file	
	6)
Dated _	Scalinher 9 2024
_	

Filing Fee: \$25.00

Typed or printed name of signee