L24000169380

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COVER LETTER

TO: Registration Section Division of Corporations					
	s Creek, LLC				
SUBJECT:Name of Limited Liability Company					
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	oondence concerning this matter	to the following:			
	Allison Morgan				
Name of Person					
	Fortis Franchise Group, Ll	LC			
	Firm/Company				
·	2487 Aloma Ave, Ste 200				
Address					
	Winter Park, FL 32792				
	City/State and Zip Code accounting@fortisfranchise.com				
	-	to be used for future annual report notification)			
For further information	concerning this matter, please c	all:			
Allison Morgan		866 243-6284 ext 104			
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 & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) 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			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FFG Johns Creek, 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 $\underline{04/09/2024}$ Florida document number L24000169380 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 "LLC." 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 _ Circ

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
AMBR	Mohamed Khalil	2487 Aloma Ave	= Add
		Ste 200	
		Winter Park, FL 32792	□Change
AMBR	Allison Morgan	2487 Aloma Ave	≅Add
		Stc 200	□Remove
		Winter Park, FL 32792	Charan
AMBR	Melissa Gebhard	2487 Aloma Ave	∃ Silainge
		Stc 200	□Remove
		Winter Park, FL 32792	
AMBR	Matthew Rajput	2487 Aloma Ave	⊒Add
		Ste 200	
		Winter Park, FL 32792	□Remove
			□Change
			Remove
			Change