L24000176963

(F	Requestor's Name)
(A	Address)
4)	Address)
(0	City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(E	Business Entity Name)
(C	Document Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:
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Office Use Only



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COVER LETTER

FO: Registration Section Division of Corporations	
SUBJECT: Shark Cuterie Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Danielle Rose Perez	
Firm/Company	
11270 WOOD OWLAVE	
Weeki Walhee FL, 346/4 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Person at 352 293 - 6477 Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & Certificate of Status \$\Bigcup \\$55.00 Filing Fee & Certificate of Status \$\Bigcup \\$60.00 Filing Fee, Certificate of Status &	

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



May 7, 2024

DANIELLE ROSE PEREZ 11270 WOOD OWL AVE WEEKI WACHEE, FL 34614

SUBJECT: SHARKCUTERIE LLC Ref. Number: L24000176963

We have received your document for SHARKCUTERIE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Rebekah White Regulatory Specialist III

Letter Number: 724A00009999

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Shark atterie

(Name of the Limited Liability Company as it n (A Florida Limited Liability C	ow appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were fill Florida document number $\underline{L24000176963}$.	led on April 15th 2024 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability companies of the limited liability companies. The new name must be distinguishable and contain the words "Limited Liability Companies."	obile Snack Cart L.L.
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	-CD
	2024
Enter new mailing address, if applicable:	:
(Mailing address MAY BE A POST OFFICE BOX)	. (2
	- 12 - 22
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida

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.

City

Zip Code

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>	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Remove
			□Change

). If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe Note:	ve date, if other than the date of filing:
the 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 ed.
Dated _	4/19/2024 April 19th, 2024. Danielle Peren
	Signature of a member or authorized refresentative of a member Ouville Perez Typed or printed name of signee