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(Requestor's Name)	
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PICK-UP WAIT	MAIL
(Business Entity Name)	
(business Emity Name)	
(Document Number)	
Certified Copies Certificates of S	tatus
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SECKET OF CHARGES

COVER LETTER

TO: Registration Section
Division of Corporations

Tallahassee, FL 32314

SUBJECT: <u>UP</u>	F RESTAURANT (Name of Lin	ansultant Selvice	25 UC	
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.		
Please return all corresp	ondence concerning this matter	r to the following:		
	Vania P	Fugaha Name of Person		
	UPF Restaur	cant consultant se	wices Lic	
		adjehill La		
		Address	S. P.	267
	- HOHLW	00 FIORISO	33026	7671 JEE 15
		City/State and Zip Code		
	Patriciaavilae	belisouth-net		,
		to be used for future annual report noti	•	D
For further information of	concerning this matter, please c	all:	• • • • • •	တ္ က ကို
Vana P	Fugaha	at (<u>154)</u> <u>286</u> Area Code Daytim	3983 te Telephone Number	න -
		raca code Dayum	ie 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 Fe Certificate of St Certified Copy (additional copy is a	tatus &
Mailing Address		Street Address:		
Registration S Division of C		Registration Sec Division of Cor		
P.O. Box 632		The Centre of T	-	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Message Control in the Limited Liability	150 HOUT DECUE	our records)
(A Florida	ty Company as it now appears or a Limited Liability Company)	(VMs. 1889) was
The Articles of Organization for this Limited Liability C	Company were filed on 6 .	- 94 - 9094 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	
m		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		5.627
	 	
B. If amending the registered agent and/or registere	d affice address an aur reca	rds, enter the name of the new registered
agent and/or the new registered office address here:	d office address on our reco	700 P
		A. 2
Name of New Registered Agent:		7. 0
New Registered Office Address:		
	Enter Florida	street address
		, Florida Zin Code
	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 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
<u>anbr</u>	Vania P. Fugaha		XAdd
			□Remove
			□Change
			□Add
			□ Remove
		· · · · · · · · · · · · · · · · · · ·	□Change
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If an effective Note: If th	date, if other than re date is listed, the date ne date inserted in thi s effective date on th	must be specific and s block does not m	cannot be prior to neet the applicab	date of filing or mo	re than 90 days afte	i onal) r filing.) Pursuant to 605 is date will not be liste	3.0207 (3 ed as th
ne record spoord is filed.	ecifies a delayed effe	ctive date, but not	an effective time	e, at 12:01 a.m. o	n the earlier of: (l	b) The 90th day after	r the
Dated	7-15-24	,		. · A			
		Signature of a r	Vaculuit nember or authori	zed representative of	f a member		
		\bacco	Typed or printed	oqaha			