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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

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

Email	Address:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MEAT N BUN LLC

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M. SOLOMON

SEP 3 0 2024

Electronic Filing Menu Corporate Filing Menu

Help

Page: 2 of 4

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mea N Bun LLC		
(<u>Name of the Limited Ljabili</u> (A Florida	ty Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability C Florida document number 1.24000400934	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	ited Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		· · · · · · · · · · · · · · · · · · ·
(Principal office address MUST BE A STREET ADDR	(ESS)	
		22
•		SEP
Enter new mailing address, if applicable:		7 2
(Mailing address MAY BE A POST OFFICE BOX)	***************************************	S = 11
B. If amending the registered agent and/or regis registered agent and/or the new registered office add	stered office address on our records, <u>en</u> ress here:	ter the Tame of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Floridastreet address	
	, Florida	
	City	ZipCode

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

From: ZenBusiness Us

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

Page: 3 of 4

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	YDALIA FERNANDEZ		🖸 Adıl
		4600 Southwest 160th Avenue APT 635, Miramar, FL 33027	■ Remove
		····-	Change
AMBR	Daryl E Perez		Add
			☐ Remove
		4600 Southwest 160th Avenue APT 635, Miramar, FL 33027	■ Change
			Add 2024 Reference Referen
			PR 4:29
			Remove
			☐ Change
			O Add
			□ Remove
		 -	□ Change
			Add
			□ Remove
			☐ Change

, D. 16	Page: 4 of 4	2024-09-25 10:42:53 UTC÷14	18506176383	From: ZenBus
D. II aine	ending any other inform	nation, enter change(s) here: (Attach add	ntional sneets, y necessary.)	
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Note:	If the date inserted in this l	e date of filing: ist be specific and cannot be prior to date of filing o block does not meet the applicable statutory f Department of State's records.	(optional) r more than 90 days after filing.) Pursualling requirements, this date will n	ant to 605,0207 (3)(b) of be listed as the
	ord specifies a delaye 90th day after the re	ed effective date, but not an effectiv cord is filed.	e time, at 12:01 a.m. on th	ne earlier of:
Dated .	September 23	. 2024		
	/s/ Daryl E Perez			
		Signature of a member or authorized representa	tive of a member	
	Daryl E Perez			

Page 3 of 3

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