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(((H24000340156 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INC AUTHORITY, ELC

Account Number : 120240000004 Phone : (775)329-7721

Fax Number : (775)376-9207

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

mail Address:	iessicarivera	_786@hotmail.com
MAIL ADDRESS:	JOSSIOEI IVOI O	_100@1101111111111111111111111111111111

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BAKED WITH LOVE BAKED GOODS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Cin	Zip Code
		loridaZip Code
New Registered Office Address:	Enter Florida street addre	231
•		
egistered agent and/or the new registered office address here	<b>e:</b>	
3. If amending the registered agent and/or registered of	Mice address on our record	ds, enter the name of the ne
		STA:
Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
Inter new mailing address, if applicable:		2024 OCT -9 AM II: 49 of the new
		er de <mark>e</mark> ne
Principal office address MUST BE A STREET ADDRESS		<b>2024</b> SEC
inter new principal offices address, if applicable:		
The new name must be distinguishable and contain the words "Limited Liabil		
A. If amending name, enter the new name of the limited liab	ility company here:	
This amendment is submitted to amend the following:		
florida document number L24000418718		
he Articles of Organization for this Limited Liability Company	were filed on 09/26/24	and assigned
(A Corta Limite)	r intentity Combany)	
BAKED WITH LOVE I (Name of the Limited Liability Compa (A Florida Limited)		rde.)

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.

H Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the tifle, name, and address of each person, being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>l'itle</u>	<u>Name</u>	Address	Type of Action
MGR	Jessica Gonzalez	1703.Swallowtail.Lane	□ Add
		Sanford, FL 32771	
			□ Change
MGR Vennise Gonzalez	Vennise Gonzalez	1703 Swallowtail Lane	🗖 Add
		Sanford, FL 32771	В Ксточс
			. Change
MGR	Dennise Gonzalez	1703 Swallowtail Lane	🖾 Add
		Sanford, FL 32771	. □ Remose
		□ Change	
			□ Add
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			. 🗗 Change
			D Add
			□ Кето\ е
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			🗖 Remove
		· · · · · · · · · · · · · · · · · · ·	Change

	om Corporate Service Center Inc 1.702.507.9682 Wed Oct 9 12:38:47 2024 MDT Page 4 of 4
D. If am	ending any other information, enter change(s) here: (Attach additional sheets, (f necessary.)
-	
Note:	ive date, if other than the date of filing: N/A (optional) fective 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 (3)(b). If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	<u> </u>
	Dennise Gonzalez
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00