Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((1125000000045/3)))



H250000000453ABCQ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Page: 2 of 6

Division of Corporations

Fax Number : (850)617-6383

Prom:

Account Name : LEGALZOOM.COM INC. Account Number : 120010000062

Phone : (323)962-8600 Fax Number : (323)389-0502

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

Email Address:

# AFOR THE NE SO

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TIN DONKEY GRILL LLC

Certificate of Status	()	
Certified Copy	. 1	
Page Count	06	_
Estimated Charge	\$55.00	; 

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

From, Arsalaan Khat

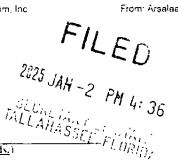
From: Arsalaan Khot

## **COVER LETTER**

TO:		ion Section of Corporations		
e1:5 167		DONKEY GRILL LLC		
SUBJEC	υΙ: <u></u> _	Name of Lim	ited Liability Company	
The enel	losed Artie	les of Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all co	rrespondence concerning this matter	to the following:	
		Mike Town		
			Name of Person	
		Legalzoom.com, Inc.		
			Firm Company	
		9900 Spectrum Dr	Name of Limited Liability Company  and fee(s) are submitted for filing.  erning this matter to the following:  wm  Name of Person  Manucom, Inc.  Firm Company  ectrum Dr  Address  "X 78717  City:State and Zip Code  agon@yahoo.com  E-mail address: (to be used for future annual report notification)  is matter, please call:  at {  300	
			Address	
		Austin, TX 78717		
			City/State and Zip Code	
		mackinwagon@yahoo.com		
		E-mail address; (	to be used for future annual report not	ification)
For furth	er informa	tion concerning this matter, please ca	aH:	
Mike To	own			
	,	ame of Person	Area Code Davim	ne Telephone Number
Enclosed	I is a check	for the following amount:		
□ \$25.	00 Filing F	ee S30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status &
		IAILING ADDRESS:	STREET/COUR	IER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clinton Building 2061 Executive Center Circle Tallahassee, FL 32301 Tc:

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF.



TIN DONKEY GRILL 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  $\frac{-12/09/2024}{}$ and assigned Florida document number | L24000510111 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Naked Flavor LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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

### 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

To:	•	Page:	5 of	ί
, 0.	•	OHO.	V 0.	١

2025-01-01 23:46.20 PST

LegalZoom com, Inc

From: Arsalean Khot

If amendin or removed	g Authorized Person(s) authorized to r I from our records:	nanage, <u>enter the ti</u>	tle, name, and address of each person being added
MGR = N AMBR = /	danager Authorized Member		2025 JAN -2 PH 4: Pepe of Action
<u>Title</u>	<u>Name</u>	Address	TALLAHASSET, FLORID, - Add
			$C \mapsto L U R i D_{r} \square$ Add
			Remove
			Change
			□ Add
			☐ Remove
			Change
			□ Add
			□ Remove
			☐ Change
			□ Add
			☐ Remove
			□ Change
			□ Remove
			Change
			Add
			□ Remove
			☐ Change

	. Page, 6 of 6	2025-01-01 23 46 20 PST	LegalZoom.com, Inc.	From Arsalaan I
D. If amo	ending any other informa	tion, enter change(s) here: (Attach a	dditional sheets, if necessary.)	
_				-
				•
				_
-				_
-			3	FILEU SO
-				. 1
-				J. 1
-				-3 C
_				. F.
				36
-				<del>,</del>
-				•••
				_
-				
-				_
-				_
-				-
-				_
E. Effect	ive date, if other than the	date of filing:	(optional)	Samuel a sam
(If an ett Note:	ective date is listed, the date mus If the date inserted in this bl	a be specific and cannot be prior to date of film ock does not meet the applicable statutory	g or more than 90 days after filing.) Pursuant to 60 r filing requirements, this date will not be lis	ted as the
docum	ent's effective date on the D	epartment of State's records.		
If the red	cord specifies a delayed	d effective date, but not an effect	ive time, at 12:01 a.m. on the earl	ier of:
(b) The	90th day after the rec	ora is filea.		
	1/02/2025			
Dated		·		
	/S/ Matthew Sc	ott Schweb		
		Signature of a member or authorized represen	itative of a member	
	Atomicon C. o. C.3. 1			
	Matthew Scott Schweb	Typed or printed name of sig	202	

Page 3 of 3