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Division of Corporations

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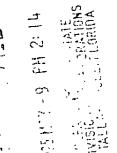
Account Number : 120010000062 Phone : (323)962-8600

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

C 1	Address:			
rmaı ı	Anaress:			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CHIPMUNK BRAND LLC



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MAY 1 2 2025

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Division of Corporations

May 6, 2025

LEGALZOOM

SUBJECT: B.B.T LLC REF: W25000062346

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note 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., " "LC., " "Ltd., " and "Co."

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

Neysa Culligan

FAX Aud. #: H25000163610  Tar

## **COVER LETTER**

TO: Registration S Division of Co			
Chipmunk	Brand LLC		
3000/ECT:	Same of Lim	ited Liability Company	
	Amendment and feets) are sub	-	
Trease retain an correspo	Erik Treutlein	ware following.	
		Name of Person	
	Legalzoom.com, Inc.		
		Firm#Company	
	11501 Domain Dr., Suite 2	(1)(1)	
	Austin, TX 78758	Address	
	rhorner2@yahoo.com	City/State and Zip Code	
		o be used for future annual report noti-	Scation)
For further information of	concerning this matter, please ca	ıl <b>i</b> :	
Erik Treutlein		800 773-0888 at ()	
Name c	of Person		e Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Fl. 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2025 HAY - 9 2
TALLAHASSEE, FLORIDA

Chipmunk Brand LLC			TALLAHASSEE FLORIL
(Name of the Limited)	Liability Company as it now appe Florida Limited Liability Company	ars on our records.)	FLORIL
The Articles of Organization for this Limited Liab Florida document number 1.25000049659		11/28/2025	and assigned
This amendment is submitted to amend the following	ing:		
A. If amending name, enter the new name of th	e limited liability company l	nere:	
Buses, Bites, and Threads LLC			
The new name must be distinguishable and contain the word	s "Limited Liability Company," the	designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable	le:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:			
	<del></del>		
(Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:		n our records, <u>e</u>	nter the name of the new
No Desire of Office Address			
New Registered Office Address:	Enter Fle	orida street address	
		Florid	u
-	City		яZip Code
New Registered Agent's Signature, if changing Reg	istered Agent:		
I hereby accept the appointment as registered a provisions of all statutes relative to the proper of accept the obligations of my position as register being filed to merely reflect a change in the reg company has been notified in writing of this cha	and complete performance o red agent as provided for in istered office address, I here	f my duties, and I Chapter 605, F.S.	am familiar with and Or, if this document is
	/S/		

If Changing Registered Agent, Signature of New Registered Agent

To:	Page:	6	of
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2025-05-09 07 39:33 PDT

LegelZoom.com, Inc.

From Candace Pringle

☐ Change

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person-being added or removed from our records</u>:

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			☐ Remove
			□ Change
		<del></del>	Continue Property of Additional Property of A
			Dr.Change 3.
<del></del>			
			□ Remove
		<del></del>	Change
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			□ Remove
		<del></del>	☐ Change
			□ Add
			□ Remove

	Page 7 of 7	2025-05-09 07 39.33 PDT	LegalZoom com, Inc	From Candace Prin
D. If am	ending any other informatic	on, enter change(s) here: (Attach a	dditional sheets, if necessary.)	
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(If an eff Note:	fective date is listed, the date must be	ate of filing:  e specific and cannot be prior to date of tilm e does not meet the applicable statutory artment of State's records.	g or more than 90 days after filing.) Pursua	
	cord specifies a delayed e 90th day after the record	ffective date, but not an effect d is filed.	ive time, at 12:01 a.m. on the	earlier of:
Dated	March 18	2025		
	/S/ Robert Wayne	Horner II		
	Sig	guature of a member or authorized represer	sative of a member	
	Robert Wincon Harris II			
	NOUGH WAYNE HOTHER H			
	Robert Wayne Horner II	Typed or printed name of sign	nee .	

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Filing Fee: \$25.00