L13000169847

(Re	questor's Name)	
(Ade	dress)	
	 	
(Adi	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	TIAW	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
	_	
<u> </u>		
Special Instructions to	Filing Officer:	

Office Use Only



600328062466

US/US/18--UUIB--UU4 **25.UU

S TALLENT MAY 1 6 2019 2019 MAY -6 AM 8: 27 SECRETARY OF STATE

COVER LETTER

. *

T	O: Registration Se Division of Cor		·	•	
st	ЈВЈЕСТ:		WeUness U(ted Liability Company	1	<u> </u>
Th	ne enclosed Articles of a	Amendment and fee(s) are sub	nitted for filing.		
Ple	ease return all correspon	ndence concerning this matter (o the following:		
		Blanca	Stella Mejia		
			Name of Person		
			Firm/Company		
		1825 Ponc	e de Leon Blud	1 #136e	
		blanca E-mail address: (i	Les, FL 33134 City/State and Zip Code 9blanca stell of the used for future annual repo	v. Com	
Fo	r further information ec	oncerning this matter, please ca	·		
	Barca St Name of	Ella Hejia Person		1 <i>0-1311</i> Daytime Telephon	e Number
En	closed is a check for the	e following amount:			
ÞÓ	\$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed	1)	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

	<i>Vell-ness</i>				
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	v as it now appea ability Company)	rs on our records.)	_	_	
The Articles of Organization for this Limited Liability Company vi Florida document number <u>L13000169847</u> . This amendment is submitted to amend the following:		10/10/10/12	anc	Lassig	ned
A. If amending name, enter the new name of the limited liability	ity company h	ere.			
STEWAR WEL					
The new name must be distinguishable and contain the words "Limited Liability			breviation	 n "L.L.(C."
Enter new principal offices address, if applicable:		-			
(Principal office address MUST BE A STREET ADDRESS)			⊸m —m	22	
[17mcparoffice adaress WOST DLA STREET ADDRESS]				9 HA	
					AECITA CALAD
Enter new mailing address, if applicable:			(A) = (A)	9	(1000)
	·		<u>00</u>	=	्रवास्त्र विकास
(Mailing address MAY BE A POST OFFICE BOX)				<u>8</u>	<u> </u>
					
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ice address or	our records, <u>enter</u>	the nai	ne of	the new
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Flo	rida street address			
		, Florida			
	City		Zip Co	nde -	
New Registered Agent's Signature, if changing Registered Agent:					
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete po accept the obligations of my position as registered agent as pro being filed to merely reflect a change in the registered office ac	erformance of ovided for in (my duties, and I am fa Chapter 605, F.S. Or,	amiliar if this d	with ϵ	and

If Changing Registered Agent, Signature of New Registered Agent

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 = 1 AMBR = 1	Manager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			
		-	Remove
			☐ Change
<u></u>			Add
			Remove
			Change
			☐ Remove
			Change
			Remove
			Change
			
			Remove
			Change
			□ Add
			Remove
			Change.

	·
•	
•	
•	
	
-	
-	
_	
-	
Note:	ive date, if other than the date of filing:
ne red The	tord 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	5-1 2019 Blance & Mjn
	Signature of a member or authorized representative of a member
	BUNDA STELLA MEJIA Typed or printed name of signee
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00