

L190000110611

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

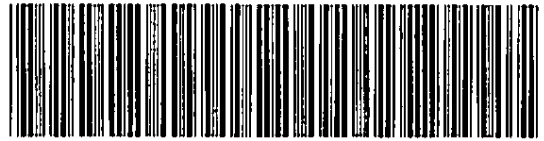
(Business Entity Name)

(Document Number)

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2021 SEP 22 PM 1:04

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Amend  
Name chg

SEP 21 2021

1 ALBRITTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Freshbreath LABS. LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

AHPALY CORADIN  
Name of Person

Fresh Breath LABS.  
Firm/Company

1395 Brickell Avenue Suite 800  
Address

Miami, Florida, 33131  
City/State and Zip Code

Ahpaly@coradinlaw.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ahpaly Coradin at (305) 200-8816  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee      ☐ \$30.00 Filing Fee & Certificate of Status      ☐ \$55.00 Filing Fee & Certified Copy (additional 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 Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



2021 SEP 22 AM 11:22

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 4, 2021

FRESHBREATH LABS LLC  
3201 NE 183 ST #2602  
AVENTURA, FL 33160

SUBJECT: FRESHBREATH LABS LLC  
Ref. Number: L19000110611

We have received your document for FRESHBREATH LABS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 021A00018311

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

2021 SEP 22 PM 1:04  
FILED

Fresh Breath Labs 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 4/22/2019 and assigned Florida document number L19000110611

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Good Breath Labs. 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)

3201 NE 183 St #2602  
Aventura, Florida  
33160

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

City, Florida Zip Code

**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.*

Lize Mingo Teal

If Changing Registered Agent, Signature of New Registered Agent

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

CEO	Licensee	Licensee Address	Licensee City	Licensee State	Licensee Zip	Licensee Phone	Licensee Email	Licensee Status
	Lizemingo Klein	3201 NE 183 <sup>rd</sup>	Aventura, Florida		#2602			<input type="checkbox"/> Add
								<input type="checkbox"/> Remove
		33160						<input checked="" type="checkbox"/> Change
								<input type="checkbox"/> Add
								<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

We would like to change the name of the  
LLC. Today it is Fresh Breath LASS.  
The new name shall be Good Breath LASS. LLC

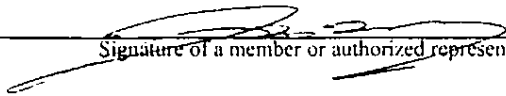
E. Effective date, if other than the date of filing: 7/9/21 (optional)

(If an effective 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)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 7/9 . 2021 .

  
Signature of a member or authorized representative of a member

Liza Marigo Klein (Liza Marigo Klein)  
Typed or printed name of signer

Filing Fee: \$25.00