

LZO 000174340

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

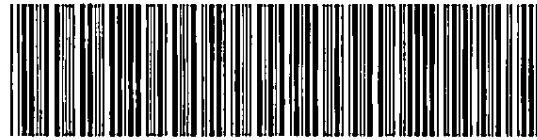
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600352849386

10/08/20--01017--005 **30.00

20 OCT -8 AM 2:14

T. LEMMON
REV 10-11-17

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Vanover Wellness 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:

Deidra Thomas-Vanover
Name of Person

Vanover Wellness LLC
Firm/Company

2801 NW 23rd Blvd, #5130
Address

Gainesville, FL 32605
City/State and Zip Code

deidra07@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deidra Thomas-Vanover at (386) 344-2879
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

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

Vancouver Wellness, 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 June 23, 2020 and assigned Florida document number L20000174340.

This amendment is submitted to amend the following:

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

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

Florida

City

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.

If Changing Registered Agent, Signature of New Registered Agent

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 = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	<u>Deidra Thomas-Vanover</u>	<u>2801 NW 23rd Blvd, #S130</u>	<input checked="" type="checkbox"/> Add
		<u>Gainesville, FL 32605</u>	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
AMBR	<u>Tamarick Vanover, JR.</u>	<u>2801 NW 23rd Blvd, #S130</u>	<input type="checkbox"/> Add
		<u>Gainesville, FL 32605</u>	<input type="checkbox"/> Remove
		_____	<input checked="" type="checkbox"/> Change
AMBR	<u>Dedrick Vanover</u>	<u>2801 NW 23rd Blvd, #S130</u>	<input checked="" type="checkbox"/> Add
		<u>Gainesville, FL 32605</u>	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
AMBR	<u>Tamia Vanover</u>	<u>2801 NW 23rd Blvd, #S130</u>	<input checked="" type="checkbox"/> Add
		<u>Gainesville, FL 32605</u>	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

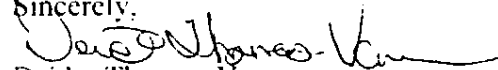
September 15, 2020

RE: Cover letter addressing daytime phone number and return address for Amendment of the Articles of Organization of a FL LLC for Vanover Wellness, LLC.

Telephone number: 386-344-2879

Return Address: 2801 NW 23rd Blvd., #S130, Gainesville, FL 32605

Sincerely,



Deidra Thomas-Vanover