L13000050222

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE

TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: UNITED CO PACK, 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:

Elizabeth France
Name of Person

UNITED CO PACK, LLC
Firm/Company

8675 SE 155th pl
Address

Summerfield, FL 34491
City/State and Zip Code

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

For further information concerning this matter, please call:

Elizabeth France at (352) 303-1163
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 13, 2013

ELIZABETH FRANCE
8675 SE 155 PLACE
SUMMERFIELD, FL 34491

SUBJECT: UNITED CO PACK, LLC
Ref. Number: L13000050222

We have received your document for UNITED CO PACK, 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 registered agent must sign accepting the designation.

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) 245-6051.

Leslie Sellers
Regulatory Specialist II

Letter Number: 113A00011844

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

UNITED CO PACK, 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 04/04/2013 and assigned Florida document number L13000050222.

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 end with 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)

8675 SE 155th pl
Summerfield, FL 34491

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

8675 SE 155th pl
Summerfield, FL 34491

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: Elizabeth France

New Registered Office Address: 8675 SE 155th pl
Enter Florida street address

Summerfield, **Florida** 34491
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 608, 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.

Elizabeth France

If Changing Registered Agent, Signature of New Registered Agent

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13 JUN -5 PM 4:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	Steven Vander Meade	6128 Spring Lake Hwy Brooksville, FL 34601	☐ Add ☑ Remove
MGRM	Catherine F Vander Meade	6128 Spring Lake Hwy Brooksville, FL 34601	☐ Add ☑ Remove
MGRM	Elizabeth France	8675 SE 155th pl Summerfield, FL	☑ Add ☐ Remove
MGR	Dianne Ward	PO Box 12078 Brooksville, FL 34603	☑ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated _____

_____
Signature of a member or authorized representative of a member

Elizabeth France
Typed or printed name of signee

Filing Fee: $25.00