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| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| (Ac | ddress) | |
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| (Ci | ty/State/Zip/Phone | » #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | usiness Entity Nan | ne) |
| (Do | ocument Number) | ., |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE
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TRANSMITTAL LETTER

| TO: Registration Sect Division of Corp | | | | |
|---|---|---|--|-------------------------------|
| SUBJECT: | Nutrition Life (Name of Lin | nited Liability Company) | | |
| The enclosed Articles of A | Amendment and fee(s) are sub | mitted for filing. | | |
| Please return all correspon | ndence concerning this matter | to the following: | | |
| | Kirsten Her | OES Jame of Person) | | |
| _ \(\frac{1}{2}\) | rition LifeLine | irm/Company) | ALLA | 200A DI SECRI |
| 2141 | N. University | Or. # 278 | | DEC 16: AN IO: |
| | val Springs, F | L 33071 State and Zip Code) | | AN 10: 51 OF STATE OF INSIDA |
| For further information co | oncerning this matter, please c | all: | | |
| <u>Kirsten</u> | (Name of Person) | at (<u>954</u>) <u>323 -</u> (Area Code & Daytime | - 9589 Telephone Number) | _ |
| Enclosed is a check for the f | ollowing amount: | | | |
| \$25.00 Filing Fee | S30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee Certificate of Status of Certified Copy (additional copy is en | & |

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Taliahassee, Florida 32399

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Present Name)
(A Florida Limited Liability Company)

Nutrition Li

| FIRST: The Articles of Organization were filed on 8/19/2004 and assigned document number L04000011159 | |
|---|----------|
| SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company: | |
| The name of the limited liability company has changed | |
| to Jobsin Anything.com, LLC, Der instructions received | |
| Via email from corphelp @ dos. State. fl. us (see attached | |
| email). | |
| (Change name of company to: Jobsin Anything. com, LLC = = | |
| A DEC AHAS | Π |
| Dated Deamber 13 , 2004 . Fig. 2004 | 7 |
| Signature of a member or authorized representative of a member | <i>j</i> |
| Kirsten Herbes Typed or printed name of signee | |
| | |