

4/7/2020

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H20000103326 3)))



H200001033263ABCR

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : BURKE FAULKNER LAW, P.A.  
Account Number : I20150000064  
Phone : (727)781-7428  
Fax Number : (727)214-2814R. WHITE  
APR 09 2020

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: debbie@burkefaulknerlaw.com

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
LABELLE BOTANICS LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2020 APR -8 PM 3:12

Electronic Filing Menu

Corporate Filing Menu

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ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

H20000103326 3

2020 - 8 11 8:12

LABELLE BOTANICS, 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 03/03/2005 and assigned  
Florida document number L05000021619.

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)

U.S. Nutraceuticals, Inc.

2751 Nutra Lane

Eustis, FL 32726

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:

U.S. Nutraceuticals, Inc.

New Registered Office Address:

2751 Nutra Lane

*Enter Florida street address*

Eustis

*City*

Florida 32726

*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

By: Umasudhan Palaniswamy, Director

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	CHARLES C. WILCOX	574 RC Cook Road	<input type="checkbox"/> Add
		Blowing Rock, NC 28605	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Umasudhan Palaniswamy	2751 Nutra Lane	<input checked="" type="checkbox"/> Add
		Eustis, FL 32726	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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