L05000073718

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TO:

Registration Section
Division of Corporations

SUBJECT:

SAM THE WEEDMAN 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:

NICK FANELLA

Name of Person

PROFESSIONAL OFFICE SERVICES

Firm/Company

434 TANGLEWOOD DRIVE

Address

FT WALTON BEACH FL 32547

City/State and Zip Code

NFANELLA@COX.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NICHOLAS FANELLA

*_,*850**862-713**

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

Q\$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SAM THE WEEDMAN 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 Liabil	ity Company were filed on 07/272005	and assigned.
Florida document number L05000073718	•	
This amendment is submitted to amend the followin A. If amending name, enter the new name of the		23 MIN OO
_	mined habinty company nere:	88 8
SAM THE WEED MANAGER LLC		
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the design	ation "LLC" or the abbreviation
Enter new principal offices address, if applicable	;	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	0	
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:		enter the name of the new
Time of Front Registered Figure.		
New Registered Office Address:		
	Enter Florida str	eet address
	, Flor	* * * * * * * * * * * * * * * * * * *
	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.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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

MGR = Manager MGRM = Managing Member

<u>Title</u>

<u>Name</u>

<u>Address</u>

Type of Action





D.	If amending	g any (other information, en	ter change(s) here:	(Attach additional sheets, if necessary.)
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Dat	 ted	ينه	5/13/13	. 9		
		ار ا	Lan In	Zasto		
	W.		Signature of	a member or authoriz	ed representative of a member	
	Š	AMI	JEL A. LABAST			
	_			Typed or printed i	name of signee	-

Page 3 of 3
Flling Fee: \$25.00

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