

206000065576

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

(Document Number)

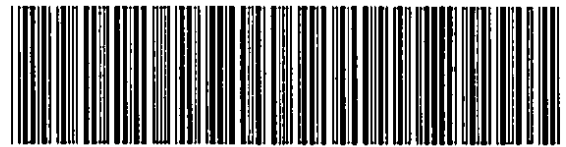
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COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Carolina Investment Properties, 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:

Nicholas V. Pulignano, Jr.

Name of Person

Marks Gray, P.A.

Firm/Company

1200 Riverplace Blvd. Suite 800

Address

Jacksonville, FL 32201

City/State and Zip Code

nvp@marksgray.com

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

For further information concerning this matter, please call:

Nicholas V. Pulignano, Jr.

904

631-2578

at ()

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

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

Carolina Investment Properties, 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 28, 2006 and assigned Florida document number 1.06000065576.

This amendment is submitted to amend the following:

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

Natures FL, LLC

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:

6643 Soaring Eagle Way

(Principal office address MUST BE A STREET ADDRESS)

Sarasota FL 34241

Enter new mailing address, if applicable:

6643 Soaring Eagle Way

(Mailing address MAY BE A POST OFFICE BOX)

Sarasota FL 34241

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:

Jigar Patel

New Registered Office Address:

6643 Soaring Eagle Way

Enter Florida street address

Sarasota

City

Florida 34241

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	Nicholas V. Pulignano, Jr.	4567 Ortega Island Drive	<input type="checkbox"/> Add
		Jacksonville, FL 32210	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Elizabeth M. Pulignano	4567 Ortega Island Drive	<input type="checkbox"/> Add
		Jacksonville, FL 32210	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jigar Patel	6643 Soaring Eagle Way	<input checked="" type="checkbox"/> Add
		Sarasota FL 34241	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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OFFICE OF STATE

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Charles J. Rodriguez
Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00