

L06000 118 232

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

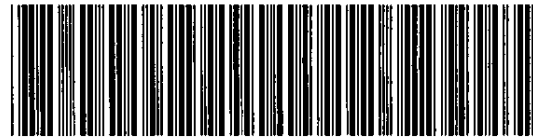
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 DEC 13 PM 2:21

DEC 14 2012

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VITAMIN DEPOT ONLINE.COM, 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:

DANIEL BRISTER

Name of Person

Firm/Company

1726 KEARNEY AVENUE

Address

NAPLES, FL 34117

City/State and Zip Code

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

For further information concerning this matter, please call:

DANIEL BRISTER

Name of Person

at (239) 404-0616

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)

dept of state

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

RECEIVED

12 DEC 14 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

November 27, 2012

DANIEL BRISTER
1726 KEARNEY AVE
NAPLES, FL 34117

SUBJECT: VITAMIN DEPOT ONLINE.COM LLC
Ref. Number: L06000118232

We have received your document for VITAMIN DEPOT ONLINE.COM LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your entity was administratively dissolved or its certificate of authority was revoked for failure to file the annual report/uniform business report as required by law. To reinstate this entity complete the enclosed application/report form.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return the corrected original and one copy of 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.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 812A00028248

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

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DIVISION OF CORPORATIONS
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VITAMIN DEPOT ONLINE.COM, 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 12/12/2006 and assigned
Florida document number L06000118232.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida

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

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	MARIAN STANCIK	ROZMARINOVA 41	<input checked="" type="checkbox"/> Add
		821 04, BRATISLAVA, SLOVAKIA	<input type="checkbox"/> Remove
MGRM	BORIS TETREV	HRANICNA 75	<input checked="" type="checkbox"/> Add
		821 05, BRATISLAVA, SLOVAKIA	<input type="checkbox"/> Remove
MGRM	MICHAEL HUPKA	MOJMIROVA 44	<input checked="" type="checkbox"/> Add
		900 26, SLOVENSKY GROB, SLOVAKIA	<input type="checkbox"/> Remove
MGRM	MATEJ GABRIS	WOLKROVA 25	<input checked="" type="checkbox"/> Add
		851 01, BRATISLAVA, SLOVAKIA	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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



Signature of a member or authorized representative of a member

DANIEL BRISTER

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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