L10000089867

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EXAMINER



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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: NUTRITEX 11C-	
	30
The enclosed Articles of Amendment and fee(s) are submitted for filing.	97.00
Please return all correspondence concerning this matter to the following:	13.7 (F)
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: FICH CISIO (add) Name of Person NUTCIPLE C.	
Name of Person	
Nutlitex IIC.	
Firm/Company	
3355 Pinewalk Dr N-APT 13-208.	
MARGate - F), 33063	
City/State and Zip Code Notific Selvice O Jahoo. Com E-mail address: (to be used for future artification)	
For further information concerning this matter, please call:	
Francisco Colonell at (954) 300 5294. Name of Person Area Code & Daytime Telephone Number	
·	
Enclosed is a check for the following amount:	
\$25,00 Filing Fee \$\ \text{Certificate of Status}\$\$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$\$ \text{Certified Copy} \\ \text{(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

Nutritex 11C	-		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	玉	
The Articles of Organization for this Limited Liability Company Florida document number <u>L1000089867</u> :	1 .	and assigned,	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and end with the words "Limi"L.L.C."			
Enter new principal offices address, if applicable:	3355 Yinewalk C	<u> </u>	
(Principal office address MUST BE A STREET ADDRESS)	APT 13-208. MACSATE - FT 3	3063.	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street ada	Irass	
	Emer Fioriau street auaress		
	, Florida	Zip Code	
	•	4	

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>	Name	Address	Type of Action
m20	Francisio Colonier	3355 finewalk DV N AVF 13-108 MALGATE - FT 32063:	Add Remove
MgRUM	Monathan F Boleus	Ley 3355 Pinnaf Ar N. APT 13-208: MAYATE FI 33063	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If ame		e(s) here: (Attach additional sheets, if necessary.)	. 1
 	I need to Remoi	e belenstein, joha-	<u>14</u> 99 -
Dated	J\$ 25 [201], 20	<u>, </u>	
	Francisco	or Minted name of signee NUTRITEX LLC.	
	Fi	iling Ree: \$25.00 FRANCISCO COLOM	E R

*FLORIDA-U.S.A