10000110846

(Re	equestor's Name)	
(Ad	ddress)	
(Address)		
· (Ci	ity/State/Zip/Phone	e #)
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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11 OCT ZN PHIZH IN

B. BOSTICK
OCT 2 5 2011
EXAMINER

COVER LETTER

Registration Section
Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT:	Essentia S	Stevia USA LLC	
SUBJECT:		d Liability Company	
	Amendment and fee(s) are subm		
Please return all correspon	ndence concerning this matter t	o the following:	
		Clifford Rizzi	
		Name of Person	
	Ess	entia Stevia USA LLC	
		Firm/Company	
		5529 Croydon Ct	
		Address .	
	Во	oca Raton FL 33486	
	•	City/State and Zip Code	11 0 ALLU
	E-mail address: (to	rlend@yahoo.com be used for future annual report notifice	ation) 11 OCT 24
For further information co	oncerning this matter, please ca	11:	70 - 10 - 11 - 12 - 13 - 14 - 15 - 14 - 15 - 14 - 15 - 14 - 15 - 15
CI	ifford Rizzi	at (561) 3	50-5045
Name of	Person	Area Code & Daytime	50-5045 Telephone Number
Enclosed is a check for the	e 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)
MAILI	NG ADDRESS:	STREET/COURIE	R ADDRESS:
	ition Section n of Corporations x 6327	Registration Section Division of Corporati Clifton Building	ions

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Essentia Stev	via USA LLC				
(Name of the Limited Liability Compa (A Florida Limited I	<u>ny as it now appear:</u> Liability Company)	s on our records.	1		
(, , ,				
The Articles of Organization for this Limited Liability Company were filed on			and assigned		
Florida document number L10000110846					
This amendment is submitted to amend the following:					
		_			
A. If amending name, enter the new name of the limited liab	oility company here			١.	1 (20)
Spirit Interna					ul USAI
The new name must be distinguishable and end with the words "Lim "L.L.C."	ited Liability Compar	ny," the designation	n "LLC"	or the a	abbreviation
Enter new principal offices address, if applicable:	5529 Croydon	ı Cti	 4		
(Principal office address MUST BE A STREET ADDRESS)	Boca Raton F	L 33486	7		
			77	90	* 4.4
	 		is in the second	2	, AA
Enter new mailing address, if applicable:	5529 Croydon	. (1	ارن براد	ŢŲ.	ne julij
• • • • • • • • • • • • • • • • • • • •			- 10	<u></u>	Sample 2
(Mailing address MAY BE A POST OFFICE BOX)	Boca Raton F	L 33400	<u> </u>		
				·t:	
B. If amending the registered agent and/or registered of	ffice address on o	ur records ente	er the n	ame a	of the new
registered agent and/or the new registered office address her		ir records, <u>circ</u>	i the h	and o	it the Rev
Name of New Registered Agent:					
•					
New Registered Office Address:	Fnt	er Florida street	address		
	Enter Profita Street dadress				
	C''.	, Florida			
	City		Ziį	p 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.

Jew company name:

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

wirit International USALL

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>	Address	Type of Action
<u>. </u>			Add
· · · · · · · · · · · · · · · · · · ·			Add Remove
			Add Remove
······································			Add
			Remove
···	 		AddRemove
···			Add Remove
D. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessa	ary.)
_			
			000 T
	·		
—			5/ <u>h</u> [2:
Dated	O'M		
	Signature of a member	r or authorized representative of a member	
	Typed	Clifford Rizzi or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00