## L10000118030

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SECRETARY OF STATE

J. BRYAN

FEB 1 5 .2012

**EXAMINER** 

## **COVER LETTER**

TO:	Registration S Division of Co				
SUBJI	CCT:	LIVEWELL	PHARMACY, LLC		
		**************************************	ted Liability Company		
The en	closed Articles o	of Amendment and fee(s) are sul	omitted for filing.		
Please	return all corresp	condence concerning this matter	to the following:		
			Craig A. Call		_
			Name of Person	,	. ~ <u>.</u>
		Sch	eer & Montgomery, P.C.		THE THE
			Finn/Company		電影に
			8 East Liberty Street		TALLAHASSEE, FLORID
			Address		FEST
	,	Sa	vannah, Georgia 31401		DATE 3
			City/State and Zip Code		- <i>y</i>
			shalorx@gmail.com to be used for future annual report notific		
				ation)	
For fur	ther information	concerning this matter, please of	all:		
······································		Craig A. Call	at \	233-1273	
	Name	of Person	Area Code & Daytime	Telephone Numb	er
Enclose	ed is a check for	the following amount:			
<b>₹</b> \$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	iling Fee, ate of Status & d Copy anal 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

LIVEWELL PHARMACY, 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 November 12, 2010 and assigned  Florida document number L10000118030  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  LIVEWELL, LLC  The new name must be distinguishable and end with the words "Limited Liability Company" the designation "LC" or the appropriate to the property of the designation of the designation of the appropriate to the property of the designation of the designation of the appropriate to the property of the designation of the appropriate to the property of the designation of the appropriate to the property of the property of the appropriate to the property of the property
Florida document number L10000118030
200
This amendment is submitted to amend the following:
This amendment is submitted to amend the following.
A. If amending name, enter the new name of the limited liability company here:
LIVEWELL, LLC
The new haine must be distinguishable and one with the words. Entitled Elabority Company, the designation and on the properties
"L.L.C."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
$\cdot$
Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
printing united in the policy of the policy
B. If amending the registered agent and/or registered office address on our records, enter the name of the n
registered agent and/or the new registered office address here:
Name of New Registered Agent:
Navy Deviatered Office Address
New Registered Office Address:  Enter Florida street address
25.100. 2.10. 101.000

New Registered Agent's Signature, if changing Registered Agent:

7

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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

MGR = Manager MGRM = Managing Member Type of Action Title Name Address ☐ Remove Add Remove  $\square$ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Article III, Purpose - Delete in entirety and replace with the following: To dispense and distribute by retail sale vitamins, nutraceuticals, supplements, and similar products. Notwithstanding the stated purpose, Livewell reserves the right to engage in any lawful activity, and nothing herein shall be deemed a limitation on the capacity of Livewell to act in a corporate manner. February 10 2012 Dated \_\_ Signature of a member or authorized representative of a member Craig A. Call, Esq. Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00