## 111000008004

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## **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT:	Vending LLC Jame of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	idence concerning this matter	to the following:	
	Bethany	McElhenn Name of Person	
	V CA	lending LLC Firm Company	
mziling	7935 AM	0W4 Rd N 44-28 Address	4, Naplu, Fr 34109
physical	3265 Ama beth 9996	City/State and Zip Code  O Vahoo Com or to be used for future annual report notif	dy, PL 34109 ajvending Mahatmail.ca
For further information co	ncerning this matter, please ca		
Best Mo	Ellebr- Person	at ( <u>239_)                                    </u>	- SGGG e 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)

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

(A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	y were filed on and assigned
Florida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	7,00, 4 /
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7935 Airport Rd N # 4-28 Nooles PL 34109
Please update	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	office address on our records, <u>enter the name of the records.</u>
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	Enter Florida street address
	Florida

If Changing Registered Agent, Signature of New Registered Agent

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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person—being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Amy Naskouch	25460 Buy Bee Or.	□ Add
		25460 Buy Bee Or. Bunito Springs, FL 34135	Remove
			Change
MGR	Bethany McElhern	3265 Amanda Ln #5	XAdd
		3265 Amanda Ln #5 Nade, PL 37/09	□ Remove
		, <del></del>	Change
<del></del>			Add
			□ Remove
			Change
			Add
			至 □ _cā Change
		\$ <sup>6</sup>	<b>2</b> □ Add
			□ Remove
		-	□ Change
			🗆 Add
			□ Remove
			☐ Change

	<u> </u>
	2
Note:	effective date, if other than the date of filing: S 20 (optional) 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ment's effective date on the Department of State's records.
	ecord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier $lpha$ 90th day after the record is filed.
Dated	d 8 29 18  Signature of a member or authorized representative of a member
	Bethany McElhana Typed or printed name of signee

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Filing Fee: \$25.00