# 410001732

(Re	equestor's Name)	
(Ac	dress)	
(Ac	idress)	
(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL.
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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# COVER LETTER

	Registration Se Division of Cor					
SUD IEC	Flannah LL	C				
SUBJEC	.l:	Name of Lim	ited Liability Company			
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	turn all correspo	ondence concerning this matter	to the following:			
		Octavian Gheorghe				
			Name of Person		_	
		Flannah LLC				
		•	Firm/Company		_	
		5713 Bennington Way				
			Address		-	
		Lake Worth FL 33463				
			City/State and Zip Code		-	
		mr.tavi@hotmail.com				
For furth	er information c	E-mail address: ( oncerning this matter, please ca	to be used for future annual reall:	port notification)	10 <b>5</b>	
Octavian	Gheorghe		561 598- at ( )	2646		
	Name o	f Person	Area Code	Daytime Telephone Numbe		LED
Enclosed	l is a check for th	ne following amount:				
□ \$25.0	00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	Certifica sed) Certified	ate of Status &	

MAILING ADDRESS:

TO:

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

Ent	er Florida street address
New Registered Office Address:	
Name of New Registered Agent:	
	2 - C3
registered agent and/or the new registered office address here:	$\omega_{ij}$
B. If amending the registered agent and/or registered office addre	ss on our records, enter the name of the no
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muning muress with Berthost Of the Bony	
(Mailing address MAY BE A POST OFFICE BOX)	
Enter new mailing address, if applicable:	~
(Principal office address MUST BE A STREET ADDRESS)	
Enter new principal offices address, if applicable:	
	the designation LLC or the abbreviation L.L.C.
Vapers Cupid LLC The new name must be distinguishable and contain the words "Limited Liability Company,	Path, decimation WLCV and the obligation WLLCV
A. If amending name, enter the new name of the limited liability compa	ny here:
This amendment is submitted to amend the following:	
Florida document number L11000017722	
The Articles of Organization for this Limited Liability Company were filed or	on March 27, 2014 and assigned
(Name of the Limited Liability Company as it now a (A Florida Limited Liability Comp	appears on our records.)

### 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 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 Changing Registered Agent, Signature of New Registered Agent

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
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			☐ Remove
			Change
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			☐ Remove
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ctive date, if other than the	data of filings		(optional)	1 (A) 1(3)
effective date is listed, the date mus	st be specific and cannot be prior to do ock does not meet the applicable	ate of filing or more than 90 statutory filing requires	0 days atler filing.) F	ursuant to 605.0 Ill not be listed
ecord specifies a delayed se 90th day after the rec	d effective date, but not an ord is filed.	n effective time, at	12:01 a.m. or	the earlie
d August 7	2015			
,	Ostaviau 6 Signature of a member or authorize	Lowel		
1	VON OUR IONE O	A NOON A (N/ V	~	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00