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FILED 17 APR 15 PM 4: 32 Develoan OF STATE ATTENNA SGEF MEDRID

EXAMINER
APR 18 2011

COVER LETTER

Division of Co	orporations			
SUBJECT:	Mor	e Life, LLC		
SUBJECT,		ited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.		
Please return all corresp	ondence concerning this matter	r to the following:		
		Jeffrey Brandner		
		Name of Person		
	More Life, LLC			
	Firm/Company			
	11677 Foxcreek Dr.			
		Address		
		Tampa, FL, 33636		
		City/State and Zip Code	-	
	jef E-mail address: (freymb74@gmail.com to be used for future annual report notifi	cation)	
For further information	concerning this matter, please of	call:		
.lei	frey Brandner	at (904)	755-6876	
	of Person	Area Code & Daytime		
Enclosed is a check for	the 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:

TO:

Registration Section

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

FIL	EL)	
11 APR 15	PM	4:	32

		- .	10 PM 4: 32
	More Life, LLC	13771	Mile Man
(Name of the Limited	More Life, LLC Liability Company as it now appea Florida Limited Liability Company)	rs on our records.)444	SSEE
(P	riorida Emined Liability Company)		. TALUMIDA
The Articles of Organization for this Limited L	iability Company were filed on	04-07-2011	and assigned
Florida document number L1100004	1880		
riorida document hamber	· · · · · · · · · · · · · · · · · · ·		
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name o	f the limited liability company be	wa.	
A. If amending name, enter the new name o	i the nunteu hadmiy company ne	<u> </u>	
The new name must be distinguishable and end with	sh ah a manda 97 imia di Fishilia. Cama	" 4h - d-si	I C" on the abbreviation
"L.L.C."	in the words "Limited Liability Comp	any, the designation 1	LLC or the appreviation
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	T ADDRESS)	<u></u>	
			····
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	BOX)		
		-	
B. If amending the registered agent and/o	or registered office address on	our records, enter t	he name of the new
registered agent and/or the new registered of	O	<u> </u>	
Name of New Registered Agent:			
		•11	
New Registered Office Address:	E-	ter Florida street add	
	En	uer r ioriaa sireet aaa	ress
		, Florida	
	City		Zip 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.

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>	<u>Name</u>	Address	Type of Action			
MGR	Michael Glisson	4336 Pablo Oaks Court Jacksonville, FL 32224	_ ✓ Add			
			Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
D. If amendin	g any other information, enter change(s	here: (Attach additional sheets, if necessary.)				
			_			
			_			
	April 11 2011		_			
Dated	Allen					
	New T	authorized representative of a member				
	Jeff	rey Brandner				
Typed or printed name of signee						

Page 2 of 2

Filing Fee: \$25.00