# L11000087815

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	<del>:</del> #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
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## COVER LETTER

TO:	Registration Se Division of Cor		AT.			
cup II		gainst The Grain LLC				
SUBJE	.c.:	Name of Limite	d Liability Company	<del></del>		
The en	closed Articles of	Amendment and fee(s) are subm	nitted for filing.			
Please	return all correspo	endence concerning this matter to	o the following:			
		Amy Presby				
			Name of Person			
		<del></del>	Firm/Company			
		16671 SW 79th Court	l .			
		Palmetto Bay, FL 331	Address 57			
		amy@eatATG.com	City/State and Zip Code			
		·	be used for future annual report notification	on)		
	ther information of Presby	oncerning this matter, please cal	<sup>11:</sup> 786 280-0156		000	CO-MANAGE AND ADDRESS OF THE PARTY OF THE PA
		f Person	at ()Area Code & Daytime Te	ephone Number	-7 PM 2	
Enclos	sed is a check for t	he following amount:			2: 33 S 1/4 [] ORIDA	Patricipa (
□ \$25	5.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	■\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (	e of Status &	sed)

#### **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**

ATG - Against The Grain LLC

(Name of the Limited Liability (A Florida I	Company as it now appears on our record Limited Liability Company)	ls.)
The Articles of Organization for this Limited Liability C  L11000087815  Florida document number	Company were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	
ATG - Primal Products LLC		
The new name must be distinguishable and end with the wor 'L.L.C."	rds "Limited Liability Company," the designa	tion "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	<u>YESS)</u>	
		(0)
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
Manney www.css N2.11 22211 001 011102		デー
B. If amending the registered agent and/or regist registered agent and/or the new registered office add	·	enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stre	eet address
	Line: 1 to tua sire	Let man lod
	, Flor	
	City	Zip Code
New Registered Agent's Signature, if changing Registere	d 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** Add Remove Remove Remove BETT OKUN Remove Remove Add Remove

D. If a	mnending any	other information, enter change(s) here: (Attach additional sheets, if necessary.)
•		
	<del></del>	
	October 1	2012
Dated	October 1	2013 
		Signature of a member or authorized representative of a member
	Amy H	Signature for a member or authorized representative of a member  H Presby
		Typed or printed name of signee

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Filing Fee: \$25.00

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