L11000119636

(Req	uestor's Name)	
(Addı	ress)	
		· <u>-</u>
(Addi	ress)	
(City/	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	





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B. BOSTICK SEP **0 5** 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

URIECT: EEB Eileens Energy Bar LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Eileen Forte

Name of Person

Paleo Simplified

Firm/Company

872 Cypress Cove Wev

Address

Tarpon Springs, FL 34688

City/State and Zip Code

eileen@paleosimplified.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eileen Forte

....813\446-5969

Name of Person

Area Code & Daytime Telephone Number

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)

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

EEB Eileen's Energy Bar, LLC				
(<u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appears on our reconmited Liability Company)	rds.)		
The Articles of Organization for this Limited Liability Co	ompany were filed on 10/19/2011	an	d assign	ed
Florida document number L11000119636				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ted liability company here:			
Paleo Simplified, LLC				
The new name must be distinguishable and end with the word "L.L.C."	is "Limited Liability Company," the design	nation "LLC" or	the abbr	eviation
Enter new principal offices address, if applicable:		<u>5.</u>	<u>~</u>	
(Principal office address MUST BE A STREET ADDRE	ESS)	F_r:		
		H.	ιΩ	
		15.5 17.5	1	7 '
Enter new mailing address, if applicable:		ř.	-5	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	·			•
		<u> </u>	0	
		r		
B. If amending the registered agent and/or registe registered agent and/or the new registered office addresses		enter the nar	ne of t	he new
registered agent and/or the new registered office address	ess nere.			
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida str	reet address		
		rida	· · · · · · · · · · · · · · · · · · ·	
	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		
	 		Add		
		-	Remove		
			Add		
			Remove		
			Add		
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			2013 SEP		
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			Remove		
			Add		
			Remove		
			Add		
			Remove		

D. If amending any other information, enter cha	ange(s) here: (Attach additional sheets, if necessary.)
Dated August 28th, 2	013
Dance ()	
Celeen For	Z.
,	ber or authorized representative of a member
Eileen Forte	
Ту	ped or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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