

L11000/42987

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

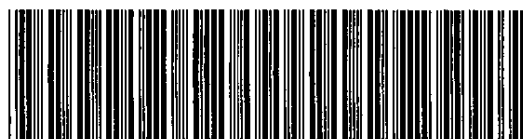
Special Instructions to Filing Officer:

A. LUNT

MAY -4 2011

EXAMINER

Office Use Only



000234322060

05/02/12--01016--019 **25.00

FILED
2012 MAY -2 AM 12:49
CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Best Self USA 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:

Samuel Sewell

Name of Person

Best Self USA LLC

Firm/Company

10202 Vanderbilt Dr

Address

Naples, FL 34108

City/State and Zip Code

sams@bestselfusa.com

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

FILED
2012 MAY -2 AM 10:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Samuel Sewell

Name of Person

at (259)

591-4565

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)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

chk 1001
4/30/12

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**

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on December 19, 2011 and assigned
Florida document number L11000142987.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation
"L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

801 12th Ave S #201

Naples, FL 34102

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address --
registered agent and/or the new registered office address here:**

Name of New Registered Agent

**Samuel and Bunny Sewell
Best Self USA LLC
10202 Vanderbilt Dr.
Naples, FL 34108**

New Registered Agent

I hereby
the provi.
accept the
being filed
company h.

**Suncoast Schools
Federal Credit Union
TAMPA, FLORIDA 33610-4110**

**LLC filed
2631828171**

4568158500 1001

comply with
and I am familiar with and
Chapter 608, F.S. Or, if this document is
I hereby confirm that the limited liability

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>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated

4-30-12

Signature of a member or authorized representative of a member

Samuel Sewell

Typed or printed name of signee

FILED
2012 MAY -2 AM 9:00
CLERK OF STATE
TALLAHASSEE, FLORIDA