

L11000145384

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

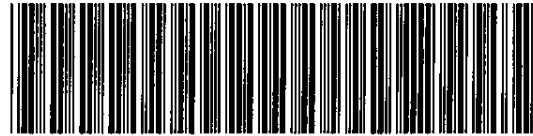
Special Instructions to Filing Officer:

Office Use Only

B. KOHR

FEB - 7 2012

EXAMINER



000219793310

02/03/12--01010--004 **25.00

FILING CANCELLED
RETURNED CHECK

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 FEB -3 AM 8:16

Bryce Lewis

(321) 482-7400

322 Raven Lane
Callaway, FL 32404

FILED
SECRETARY OF STATE
12 FEB -3 AM 8:16

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bryce G Lewis 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:

Bryce Lewis
Name of Person

Hole Foods LLC
Firm/Company

322 Raven Lane
Address

Callaway, Florida 32404
City/State and Zip Code

bryceglewis@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bryce Lewis at (321) 482-7400
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) ☐ \$60.00 Filing Fee, 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

FILED
STATE
DIVISION OF CORPORATIONS
12 FEB -3 AM 8:16

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILING CANCELLED
RETURNED CHECK

BRYCE G LEWIS LLC

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

FILED
SECRETARY OF STATE
12 FEB -3 AM 8:16
DIVISION OF CORPORATIONS

The Articles of Organization for this Limited Liability Company were filed on December 29, 2011 and assigned
Florida document number L11000145384

This amendment is submitted to amend the following:

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

Hole Foods LLC

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)

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 on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

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

FILING CANCELLED
RETURNED CHECK

<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 January 31, 2012.

Bryce G Lewis
Signature of a member or authorized representative of a member

Bryce G Lewis
Typed or printed name of signee