

L12000009971

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TALLAHASSEE, FLORIDA

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T. CLINE
JUL 20 2012
EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Simply Fresh Cans 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:

Shaneequa Lucas
Name of Person

Simply Fresh Cleans LLC
Firm/Company

116959 Sunrise Vista Dr
Address

Clermont Florida 34714
City/State and Zip Code

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

For further information concerning this matter, please call:

Shaneequa Lucas at 407 921-9079
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

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TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Simply Fresh Cans LLC

(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 11/23/12 and assigned Florida document number L1200000971

This amendment is submitted to amend the following:

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

Simply Fresh Cleans 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)

116959 Sunrise Vista Drive
Clermont FL 34714

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

116959 Sunrise Vista Drive
Clermont FL 34714

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:

Shaneequa Lucas

New Registered Office Address:

116959 Sunrise Vista Dr

Enter Florida street address

Clermont

City

Florida

34714

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.

Shaneequa Lucas
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

Title	Name	Address	Type of Action
MGR	Richard Lucas	16959 Sunrise Vista Dr Clermont FL 34714	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Shaneequa Lucas	16959 Sunrise Vista Dr Clermont FL 34714	<input checked="" 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.)

*Please Add EIN # 45-4322286

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

Dated July 17, 2012.

Shaneequa Lucas
Signature of a member or authorized representative of a member

Shaneequa Lucas
Typed or printed name of signee