L12000098996

(Re	questor's Name)	
V 12	,	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
☐ PICK-UP	☐ WAIT	☐ MAIL
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(Do	cument Number)	
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TAIL AHASSEE, FLORE

Jin 1 9 2015 T. HAMPTON

COVER LETTER :

Division of Cor	porations				
Greencare Supplied.	US LLC				
SUBJECT: Name of Limited Liability Company					
	Amendment and fee(s) are sub-	-			
The second secon	Gordon Vanscoy	to the total mig.			
		Name of Person			
		Firm/Company			
	1960 7th St S				
		Address			
	Naples, FL 34102				
		City/State and Zip Code			
	gjvanscoy@gmail.com				
		to be used for future annual report not	infication)		
For further information of	concerning this matter, please ca	all:			
Gordon Vanscoy		412 8554363 at ()			
Name o	f Person	Area Code Daytir	ne Telephone Number		
Enclosed is a check for the	he 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

TO:

Registration Section

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

Greencare US LLC		
(<u>Name of the Limited Liability (</u> (A Florida Lii	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability ComFlorida document number $\frac{L12000098996}{L12000098996}$.	npany were filed on 08/01/2012	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain the words "Limited	1 Liability Company," the designation "LLC" or th	e abbinion H.C."
Enter new principal offices address, if applicable:	1960 7th St S	SR S TI
(Principal office address MUST BE A STREET ADDRES	Naples, FL 34102	AA S
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1960 7th St S Naples, FL 34102	AMII: 47 SEF. FLORIDA
		1, Je.)

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 605, 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.

f Changing Registered Agent Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
VP	Paul G. Long	1415 Mariposa Cir	Add
		Unit 203	■ Remove
		Naples, FL 34105	☐ Change
·····			□ Add
			Remove
			C Change
		****	Add
			☐ Remove
			Change
			□ Add
			Remove
			Change
			SECRETARY OF STATE TALLAHASSEE, FLORIDA
			OF STATE
			☐ Change

D. If amending any other	information, enter	change(s) here: (Attach d	additional sheets, if neces	sary.)	
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document's effective date	in this block does not on the Department of	meet the applicable statutor State's records.	y filing requirements, this o	date will not be lis	ted as the
If the record specifies a (b) The 90th day after			tive time, at 12:01 a.	m. on the earl	er of:
Dated May 27th	Fignature of	2015	intative of a member	15 JUN SECRE	
Gordon J. Var	\bigvee			JARY JARY	C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-
		Typed or printed name of sig	gnee	AM II: 47 OF STATE	ED
		Page 3 of 3		REA REA REA REA REA REA REA REA REA REA	

Filing Fee: \$25.00