## \* 12000099550

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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	

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K.SALY EXAMNER JUN 17 2015

## **COVER LETTER**

TO:	Registration Sectorision of Corp			
CHIDIE	Life After	Normal LLC		
SUBJECT: Name of Limited Liability Company				
The enc	losed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspon	dence concerning this matter	to the following:	
		Arthur Cameron Joh	nson IV	
			Name of Person	
		Life After Normal LL	С	
	Firm/Company  3050 Windward Cove Court  Address		, <u></u>	
		Gulf Breeze FI, 32563  City/State and Zip Code		
		legal@lifeafternorma	I.NEt to be used for future annual report notific	ation
For first	ner information co	ncerning this matter, please ca	•	u.ion)
		icoming this matter, prease ca		
Came	ron Johnson		850 261-2550	
	Name of l	Person	Area Code Daytime	Felephone Number
Enclosed	d 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Life After Normal 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 Liabil	lity Company were filed on 8/2/2012	and assigned
Florida document number L12000099550		
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and end with the word	ls "Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	DDRESS)	<del>,</del>
		<del></del>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO)	<u></u>	<del> </del>
maning quaress MAT BE A FOST OFFICE BO		<del> </del>
	<del> </del>	
B. If amending the registered agent and/or the registered agent agen		enter the name of the nev
registered agent and/or the new registered office	aduress nere:	
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
_	, Flor	ida
	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 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.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Mitchell Ferrer	3050 Windward Cove Court	
		Gulf Breeze FI 32563	□ Remove
MGR	Nicholas J Markkula	3962 Canosia Rd.	Add - T
		Cloquet, MN 55720	
MGR	Arthur C Johnson IV	3050 Windward Cove Court	P. 2: 38
		Gulf Breeze FI 32563	☐ Remove
MGR	Samual David Fleming	2227 Canyon Blvd	<b>■</b> Add
		Boulder, CO 80302	☐ Remove
MGR	Michael B Frank	5579 Brentwater PI	■ Add
		Gulf Breeze, FL 32563	□ Remove
			□ Remove

If amending any other information, enter ch	nange(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing (The effective date must be specific, cannot be prior to dat the date this document is filed by the Florida Department	te of receipt or filed date and cannot be more than 90 days after
, March 16th	2015
Dated War Cit 1 Vill	•
Signature of a r	nember or authorized representative of a member
Arthur Cameron Johnson IV	
<u> </u>	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00