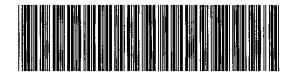
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(Re	equestor's Name)			
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K. SALY EXAMINER AUG 25 2014

COVER LETTER

TO:	Registration Sec Division of Corp					
CUDE		oothecary LLC				
Name of Limited Liability Company						
		Amendment and fee(s) are sub-	-			
		Yanko Findzhikov				
Name of Person						
		Gypsy Apothecary L	LC			
Firm/Company						
		3540 South orange	ave			
		····	Address			
		Orlando, Florida, 32	806			
		findzhikov@yahoo.co				
		E-mail address: (to be used for future annual report notifi	cation)		
		oncerning this matter, please ca				
Yank	o Findzhikov		321 9616131 at ()			
	Name of	Person	Area Code Daytime	Telephone Number		
Enclos	sed is a check for the	e following amount:				
\$2	5.00 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**



(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) and assigned Florida document number ____L13000059635 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." 3540 South Orange Ave, Enter new principal offices address, if applicable: Orlando, Florida, 32806 (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:

Gypsy Apothecary LLC

Yanko Findzhikov

New Registered Office Address:

3540 South Orange Ave

Enter Florida street address

Orlando

City

Florida

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

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 **Title** <u>Address</u> **Type of Action** <u>Name</u> Julie A Mantuano MGR 4209 Forrestal Ave, _□ Add Orlando, FI, 32806 **■** Remove □ Remove ☐ Add ___ Remove _□ Add _□ Remove _ Add ■ Remove

D. II amendi	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
the date this	date, if other than the date of filing: e date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after s document is filed by the Florida Department of State) August, 11, 2014.	
	Signature of a member or authorized representative of a member	
	YANKO GINDZHIKOV	
	Typed or printed name of signee	
	ZEIN AUG	~~9

Page 3 of 3

Filing Fee: \$25.00