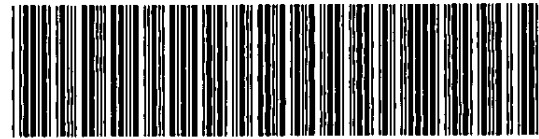


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06/24/13--01019--014 **25.00

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13 JUN 24 PM 4: 01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
JUN 25 2013
EXAMINER

(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

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Soylent Source 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:

Lauren Yi
Name of Person
Soylent Source LLC
Firm/Company
5214 Pine Mill Court
Address
Temple Terrace, FL 33617
City/State and Zip Code
lyi@soylentsource.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lauren Yi at 813 980-2909
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

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

FILED

13 JUN 24 PM 4: 01

Soylent Source LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

~~(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 04/29/2013 and assigned Florida document number L13000061799.

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."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5214 Pine Mill Court

Temple Terrace, FL 33617

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5214 Pine Mill Court

Temple Terrace, FL 33617

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:

5214 Pine Mill Court

Enter Florida street address

Temple Terrace

City

, Florida 33617

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:

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13 JUN 24 PM 4:01

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Lauren Yi	2637 Bermuda Lake Drive, 202 Brandon, FL 33510	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Lauren Yi	5214 Pine Mill Court Temple Terrace FL 33617	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

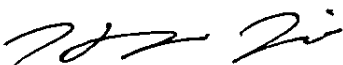
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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13 JUN 24 PM 4: 01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated June, 2013



Signature of a member or authorized representative of a member

Lauren Yi, Managing Member

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00