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FEB 1 4 2017 S. YOUNG TALLAHASSEELFLOSIO

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: The Fresh Cher 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: Limberly Concerning the following of the concerning the following of the concerning the concerning this matter to the following:
Firm/Company 2027 Westover Reserve Blud. Address
Windermere, Florida 34786 City/State and Zip Code Kperry Okimberly Perry, ORG E-mail address: (to be used for future Annual report polification) For further information concerning this matter, please call:
For further information concerning this matter, please call: Kimberly Perry at (248) 320-6843 Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$\frac{1}{2}\$\$\$ \$25.00 Filing Fee \text{ Solution} \text{ Solution} \text{ Filing Fee \text{ Certified Copy (additional copy is enclosed)}} \text{ \$\frac{1}{2}\$\$ \$60.00 Filing Fee, 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

as it now appears on our records.) The Articles of Organization for this Limited Liability Company were filed on Organization for this Liability Company were filed on Organization for Florida document number 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 contain 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) 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: New Registered Office Address: Enter Florida street address

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.

City

If 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>	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
			☐ Change
			Add
			☐ Remove
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			☐ Change
			□ Remove
			☐ Change

If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
, .
<u> </u>
Effective date, if other than the date of filing:
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:) The 90th day after the record is filed.
Dated February 40, 2017.
Signature of a member or authorized representative of a member
Kimber V Perry Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00