L13000014133

(Re	equestor's Name)	
(Ac	ldress)	
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PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
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2014 APR 28 PH 3: 56
SECRETARY OF STATE
ANASSEE, FLORID

MAY - 2 2013 T. HAMPTON

COVER LETTER

TO: Registration So Division of Cor			
Arom	a Nursery, LL	.C	
SUBJECT:		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	endence concerning this matter	to the following:	•
	Jose J. Gau	ıd	
		Name of Person	···
	Gaud Notar	y Public, LLC	
		Firm/Company	
	806 Grenad	ier Dr.	
		Address	
	Orlando, FL		
		City/State and Zip Code	
	josegaud@aol.co		
For further information co	e-mail address: (to be used for future annual report notial:	neation)
Jose J. Gau		321,750-9	443
Name o		at ()	e Telephone Number
		,	· · · · · · · · · · · · · · · · · · ·
Enclosed is a check for th	e 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)
MAILI	NG ADDRESS:	STREET/COURT	ER ADDRESS:
Registra	ation Section	Registration Section	n

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Aroma Nursery, LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L13000074133	were filed on 05/21/2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Gaud Notary Public, LLC		
The new name must be distinguishable and end with the words "Limited Liab	ility Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	806 Grenadier Dr	2014 SEC
(Principal office address MUST BE A STREET ADDRESS)	Orlando, FI 32807	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		28 PH 3: 56 RRY OF STATE ASSEEL FLORIDA
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	City, Flor	ida Zip Code
	Cuy	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, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
			□ Add
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the date this de	April 23 2014

Page 3 of 3

Filing Fee: \$25.00

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