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(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	» #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
*	N.C.	





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SECRETARY OF STATE
TALLAHASSEE, FLORID

A. B. Was APR 16. 2015

COVER LETTER

TO: Registration Security Division of Corp			• •
SUBJECT: Relay	Frog, LLC		
SUBJECT:		ted Liability Company	.
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspon-	dence concerning this matter	to the following:	
	Greg Gootee	9	
		Name of Person	
	RelayFrog, l	LC	
		Firm/Company	
	305 Sun Oa	ks Ct.	
		Address	
	Lake Mary, I	FL 32746	
		City/State and Zip Code	
	ggootee@gootee	e.net to be used for future annual re	nort notification)
For further information co	ncerning this matter, please ca		port notification)
	-		0.0477
Greg Gotoe		at (541) 21	Daytime Telephone Number
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	■ \$60.00 Filing Fee, Certificate of Status &

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

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

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RelayFrog, LLC		
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company	were filed on June 07, 2013 and assig	gned
lorida document number L13000082580		-
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
Le Gautier Soap Company, LLC		
he new name must be distinguishable and end with the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.	L.C."
Inter new principal offices address, if applicable:	. 5	
Principal office address MUST BE A STREET ADDRESS)		**C#43
	AR R	E I
	a A L' manu	FF7:470
Inter new mailing address, if applicable:	رئ رست. بتاييا	77
Mailing address MAY BE A POST OFFICE BOX)	LOS LA	
s. If amending the registered agent and/or registered offegistered agent and/or the new registered office address here Name of New Registered Agent:		f the
Name of New Registered Agent.		
New Registered Office Address:	Fatar Florida durat address	
	Enter Florida street address	
	, Florida	
	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

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 = Mark	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			□ Remove
			
			SSEE, FLORIDA
			Add Remove
			Add
			☐ Remove
		44.4194.1	□ Add
			☐ Remove

		<u></u>
ctive date, if other than the date of filing	. 4/15/2014	(optional)
ffective date must be specific, cannot be prior to date	of receipt or filed date and cannot be more that	
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Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE TALL AHASSEE FLORIO