L14000059803

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

JAN 28 2016

Y SULKER

FLORIDA DEPARTMENT OF STATE
Division of Corporations

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2016 JAN 21 PM 4:21
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TALLAHASSEE, FLORIDA

January 11, 2016

MARTIN A DESROCHERS
8113 YELLOW CRANE DRIVE
KISSIMMEE, FL 34747

SUBJECT: OPERATION: PINEAPPLE, LLC
Ref. Number: L14000059803

We have received your document for OPERATION: PINEAPPLE, LLC and your check(s) totaling $25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 116A00000593

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: OPERATION: PINEAPPLE, 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:

MARTIN A DESROCHERS
Name of Person

OPERATION: PINEAPPLE
Firm/Company

8113 YELLOW CRANE DRIVE
Address

KISSIMMEE, FL 34747
City/State and Zip Code

MARTY.DESROCHERS@OPERATIONPINEAPPLE.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARTY DESROCHERS at (702) 234-7065
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

OPERATION: PINEAPPLE, LLC

(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 APRIL 11, 2014 and assigned Florida document number L14000059803.

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)

8113 YELLOW CRANE DRIVE
KISSIMMEE, FL 34747

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

8113 YELLOW CRANE DRIVE
KISSIMMEE, FL 34747

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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: MARTIN A DESROCHERS

New Registered Office Address: 8113 YELLOW CRANE DRIVE
Enter Florida street address

KISSIMMEE, **Florida** 34747
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

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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

Title	Name	Address	Type of Action
MGR	JOSHUA LIEBMAN	731 Palm Drive	☐ Add
		Orlando, FL 32803	■ Remove
			☐ Change
MGR	MELEA G DESROCHERS	8113 YELLOW CRANE DRIVE	■ Add
		KISSIMMEE, FL 34747	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
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			☐ Add
			☐ Remove
			☐ Change

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

Also, if you can, please correct our Federal Tax ID from 45-4913043 to 47-0976103. This tax ID is the active FEIN for Federal reporting.

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E. Effective date, if other than the date of filing: December 26, 2015 **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated December 26 2016

Signature of a member or authorized representative of a member

Martin A Desrochers

Typed or printed name of signee

Filing Fee: $25.00