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B. BOSTICK
JUN 1 2 2014
EXAMINER

## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT: Pristi	ne Products, LLC	2	
Sobolett.	<del> </del>	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
		Jesse Mirabal	
		Name of Person	
		Pristine Products, Lu	.c
		Firm/Company	20. PS
		1581 Neosho St. NE	Liver control of the second of
		Address	expends of the control of the contro
		Palm Bay, FL 32907 City/State and Zip Code	
			Il.com
	E-mail address:	stine products in to Egma to be used for future annual report notifi	cation)
For further information co	oncerning this matter, please o	all:	•
\ acc	se Mirabal	201 . 407-	1395
Name of			Telephone Number
Enclosed is a check for the	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)

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

Pristine Produ (Name of the Limited Liability Compa (A Florida Limited)			
The Articles of Organization for this Limited Liability Company Florida document number <u>LIHØØØØ77357</u> .		부 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:		
The new name must be distinguishable and end with the words "Limited Liab	oility Company," the designation "LLC"	or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	13 N Babcock St.	ſ	
(Principal office address MUST BE A STREET ADDRESS)	Melbourne, FL 32935	500 3	
Enter new mailing address, if applicable:	PO BOX 500355		
(Mailing address MAY BE A POST OFFICE BOX)	Malabar, FL 32956		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		enter the name of the new	
Name of New Registered Agent: Jesse Min	abal		
New Registered Office Address: 1581 Ncosho St. NE  Enter Florida street address			
Palm Bay	City , Florid	da 32907 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.

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:

MGR = Manager AMBR = Authorized Member				
<u>Title</u>	Name	Address	Type of Action	
MGRM	Brian Welch	1370 Meding Ave. NW	Add	
		Palm Bay, FL 32907	Remove	
MGRM	Rachel Renkens	1581 Neosho St. NE	DV/Add	
		Palm Bay, FL 320 329\$7	☐ Remove	
		<u> </u>	☐ Add  ☐ Remove ☐ Add ☐ Add ☐ Remove	
			Add Remove	

D. If amending any other info	rmation, enter change(s) here: <i>(Attac</i>	ch additional sheets, if necessary.)
Just for clarific	cation:	
· Brian Welch	n no longer has any ties to P	Instine Products, LLC
· Jesse Miran	bal is the new Registered A	gent for the business; the
<u>address</u> in	formation for the LLC change	jed accordingly as well
· Rachel Re	nkens should be added to	Pristine Products, LLC as
E. Effective date, if other than (The effective date must be specific, the date this document is filed by the	the date of filing:  , cannot be prior to date of receipt or filed date are the Florida Department of State)	onew MGRM (optional) and cannot be more than 90 days after
Dated June L	1 , 2014.	
fmy	Signature of a member or authorized repr	esentative of a member
	Tesse Mive	
	i yped of printed name of	i signee

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Filing Fee: \$25.00