Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : RICHARDS, GILKEY, FITE, SLAUGHTER, PRATESI & WARD, P.A.

Account Number : 075350000244 Phone : (727)443~3281 Fax Number : (727)447~8830

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: C

cward o richards gilkey

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FRUIT CHOICE LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FRUIT CHOICE LLC.		
(Name of the Limited Liability Compa (A Florida Limited I	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L14000125807	were filed on August 11, 2014	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 contain the words "Limited Liabil	tity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	795 Bayway Blvd	
(Principal office address MUST BE A STREET ADDRESS)	Clearwater Beach, FL 33767	
Enter new mailing address, if applicable:	795 Bayway Blvd Clearwater Beach, FL 33767	
(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		ASSEA ASSEA
Name of New Registered Agent:		
New Registered Office Address:	Enser Florida street address	S IA
 	, 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

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05/09/2016 15:18 FAX 7274478830 Richard Gilkey H16000114947 3

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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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Mayur Vora	4625 East Bay Drive, Ste 204	
		Clearwater, FL 33764	■ Remove
			Change
			П Rеточе
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			☐ Remove
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			AHASSEE OR RECORDER
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			Dr හ
			□ Remove
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Address change for Uday Lele - 795 Bayway Blvd, Clearwater Beach, FL 33767	
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ative data if other than the date of filings	(ontional)
ctive date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing or more than 9	O days after filing.) Pursuant to 60
e: If the date inserted in this block does not meet the applicable statutory filing require ument's effective date on the Department of State's records.	ments, this date with not be its
ecord specifies a delayed effective date, but not an effective time, at	12:01 a.m. on the earli
ne 90th day after the record is filed.	
May 9 201/2 21	
d	
Signature of a member or authorized representative of a mem	

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Filing Fee: \$25.00