# L14000/63/31

(Re	equestor's Name)	
(Ad	ldress)	· 
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
<u>:</u>		
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SECRETABLE FINANCE

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## COVER LETTER

TO: Registrati Division of	on Section of Corporations		* 
SUBJECT:	GREEN C	COLA LLC  nited Liability Company	<del>.</del>
The enclosed Artic	les of Amendment and fee(s) are sub	omitted for filing.	
Please return all co	rrespondence concerning this matter	to the following:	
	DAU ID	CAMPBELL Name of Person	<del></del>
	<del> </del>	Firm/Company	
	5337 EU	ERWOOD RO	
	SARASC DM CA E-mail address: (	City/State and Zip Code  AMPBELL  to be used for future annual report notifi	DA 34235 DITUE, COM
For further informa	tion concerning this matter, please c	all:	
DAUIL	AMPBE//	at (94/) 374 - Area Code Daytime	-6047 e Telephone Number
Enclosed is a check	for the following amount:		
□ \$25.00 Filing F	\$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



November 10, 2014

DAVID CAMPBELL 5337 EVERWOOD RUN SARASOTA, FL 34235

SUBJECT: GREEN COLA LLC Ref. Number: L14000163131

We have received your document for GREEN COLA LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

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.

Tammy Hampton Regulatory Specialist III

Letter Number: 714A00024015

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GREEN COLA	LLC	
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $4.7400163137$		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab  The new name must be distinguishable and end with the words "Limited Liab	+ Cola LLC	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		LLC Z
Enter new mailing address, if applicable:		HASSEE.
(Mailing address MAY BE A POST OFFICE BOX)		11:5 11:5
		6 H 6
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	ffice address on our records, <u>e</u> :	nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		·
	Enter Florida street address	
<del> </del>	, Florid	Zip Code
	~	in come

#### 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

MGR = M	lanager uthorized Member		
AMBR = A	uthorized Member		
<u> Citle</u>	<u>Name</u>	Address	Type of Action
		_	□ Add
		<del>-</del>	□ Remove
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	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.,
<u>-</u>	, 1
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_	
The effe	ive date, if other than the date of filing:  (optional)  (optional)  (optional)  (otive date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after this document is filed by the Florida Department of State)
Dated .	11/3/19
	Laved Campbell
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00

TILED

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SECRETARY OF STATE
SECRETARY OF STATE