

L14 000 178 606

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

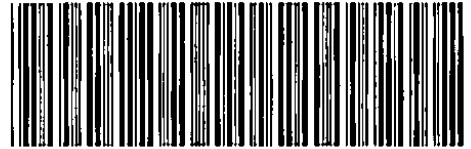
(Business Entity Name)

(Document Number)

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09/17/18--01002--033

FILED
OCT 1 2019
S. YOUNG

OCT 01 2019
S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FORTUNATE ROOTS, 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:

TYREL J. SCHELE
Name of Person

FORTUNATE ROOTS LLC
Firm/Company

11975 ACOSTA RD.
Address

JACKSONVILLE, FL. 32223
City/State and Zip Code

TY@SWEETJAX.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TYREL J. SCHELE at (904) 613-7177
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

LIMITED LIABILITY COMPANY

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Fortunate Roots 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 NOVEMBER 18, 2014 an
Florida document number L14000178606.

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

11975 ACOSTA RD.
JACKSONVILLE, FL. 32223

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

11975 ACOSTA RD.
JACKSONVILLE, FL. 32223

**B. If amending the registered agent and/or registered office address on our records, enter the new
registered agent and/or the new registered office address here:**

Name of New Registered Agent:

TYREL J. SCHIELE

New Registered Office Address:

11975 ACOSTA RD.

Enter Florida street address

JACKSONVILLE

City

Florida

322

Zip Co.

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.

Tyrel J. Schiele

If Changing Registered Agent, Signature of New Registered Agent

E. Effective date, if other than the date of filing: 9/16/19 (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

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be 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 ea
(b) The 90th day after the record is filed.

Dated September 16, 2019.



Signature of a member or authorized representative of a member

Daniel D. Ray
Typed or printed name of signee