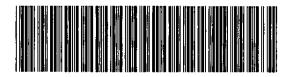
L14006 171177

(Re	equestor's Name)	
(Ac	dress)	· ··
(Ac	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		i i

Office Use Only



100269220611

02/09/15--01026--007 **25.00

15 FEB -9 PH 2: 56

L'Estarone FEB 17 2015

COVER LETTER

	gistration Sec vision of Corp		en a de la fina de la	
allo in am		ster Fomula EMS LLC		
SUBJECT	·	Name of Limi	ited Liability Company	
The enclose	ed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspor	ndence concerning this matter	to the following:	
		Erin Puleo		
			Name of Person	
		THE Master Formula	a EMS LLC	
			Firm/Company	
		8731 Leeland Arche	r Blvd	
			Address	
		Orlando FI 32836		
			City/State and Zip Code	
		Tmasterfomulaems@	•	4
			to be used for future annual report notific	cation)
For further	information co	oncerning this matter, please ca	all:	
Erin Pul	eo		754 224-0837	
	Name of	'Person		Telephone Number
Enclosed is	a check for th	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

(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 Liabili Florida document number L1400181173	ity Company were filed on 11/24/2014	and as	signed
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	limited liability company here:		
The new name must be distinguishable and end with the word	s "Limited Liability Company," the designation "LLC" or the	abbreviation "	L.L.C."
Enter new principal offices address, if applicable	s:		
(Principal office address MUST BE A STREET A	DDRESS)		
			_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u> </u>		
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>ente</u> address here:	r the name	of the new
Name of New Registered Agent:		图 =	
		22 E	
New Registered Office Address:	Enter Florida street address	8-6 -6	- 2 met p. - 1 met p. - 1 met p.
_	, Florida, City	Zip Code	\$ \$ £
New Registered Agent's Signature, if changing Regis	stered Agent:	C 22 5	I want
I hereby accept the appointment as registered as provisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the region company has been notified in writing of this cha	and complete performance of my duties, and I an eed agent as provided for in Chapter 605, F.S. O istered office address, I hereby confirm that the I	gree to com a familiar w r, if this doc	ith and cument is

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Erin Puleo	8731 Leeland Archer Blvd	■ Add
		orlando FL 32836	□ Remove
MGR	Joe Jones	8731 Leeland Archer Blvd	A dd
		Orlando FI 32836	☐ Remove
CEO	Erin Puleo	8731 Leeland Archer Bivd	Add
		Orlando FL 32836	■ Remove
VP	Joe Jones	8731 Leeland Archer Blvd	
		Orlando FL 32836	■ Remove
			15 FEB
			DAdd TO THE PROPERTY OF THE PR
			756 RIDX
			Add
			□ Remove

cetive date, if other than the date of filing: effective 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) January 30 2015		
ate this document is filed by the Florida Department of State)		
ate this document is filed by the Florida Department of State)		
ate this document is filed by the Florida Department of State)	· · · · · · · · · · · · · · · · · · ·	
January 30 2015		
u	nuary 30	2015
9/11/19/00	91	ii/ Re000
Signature of a member or authorized representative of a member	Cianati	ture of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00