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Doing so will generate another cover sheet.

To:	Division of Co Fax Number	prporations : (850)617-6383		19 JUL	رغي
	Account Number Phone Fax Number email address fo	: REGISTERED AGENTS INC. : I20090000081 : (307)200-2803 : (855)330-1010 or this business entity to be used for	future	16 AH % 17	
		. Enter only one email address please.			

Email Address:\_

;7 LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **BIOBOTANICAL, LLC** Certificate of Status 0 Certified Copy 0 Page Count 04 <u>o</u> **Estimated** Charge \$25.00

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Help

## ARTICLES OF AMENDMENT TO **ARTICLES OF ORGANIZATION** OF

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Biobotanical, LLC (Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.)				
The Articles of Organization for this Limited Liability Company Florida document number L15000009608	y were filed on 01/16/2015 and assigned				
This amendment is submitted to amend the following:					
A. If amending name, <u>enter the new name of the limited lia</u>	bility company here:				
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the abbreviation "L.L.C."				
Enter new principal offices address, if applicable:	7901 4th St N				
(Principal office address MUST BE A STREET ADDRESS)	STE 300				
	St. Petersburg FL 33702				
Enter new mailing address, if applicable:	7901 4th St N				
(Mailing address MAY BE A POST OFFICE BOX)	STE 300				
	St. Petersburg FL 33702				

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

Name of New Registered Agent:	Registered Agents Inc	·
New Registered Office Address:	7901 4th St N STE 30	0
<u>u</u> t.	Enter Flor	ndo street address
	St. Petersburg	, Florida 33702
	Cuy	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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

## MGR = Manager AMBR = Authorized Member

• •

<u>Title</u>	Name	Address	<u>Type of Action</u>
MGRM	FENG SHUI HERBALS, LLC	16192 COASTAL HIGHWAY	🗆 Add
		LEWES, DE 19958	☐ Remove
			Change
MGRM	Chris Mitchell	7901 4th St N STE 300	🗹 Add
		St. Petersburg, FL 33702	Remove
			Change
			🗆 Add
			Remove
			Change
			🗆 Add
			_ 🗆 Remove
			🗆 Change
			_D Add
			_ Remove
			🗆 Change
			🗆 Add
			_ Remove
			_□ Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated July 16	2019	「二」	UL 61	
	-R. m. P.L.	報告	۲۱6	1
Riley Park	gnature of a member or authorized representative of a member		AH 8	U.
<u> </u>	Typed or printed name of signee	n.		

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Filing Fee: \$25.00