# Lisoppe Jelle

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### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Drink Pink Be Heathy LC  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:
Erin Rosavio Name of Person
Drink Pink Be Healthy UC Firm/Company
8076 1018t Ct Address
Verb Blach FL 37967  City/State and Zip Code
E-mail address: (to be used for filture annual report notification)
For further information concerning this matter, please call:
Ein Rosavio at 772 S71 3752  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status  \$55.00 Filing Fee Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, 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 ARTICLES OF ORGANIZATION

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(Name of the Limited L	ability Company orida Limited Liab	as it now appears on or oility Company)	ır records.)		
The Articles of Organization for this Limited Liabili		ere filed on $21$	8/2015	and a	assigned
This amendment is submitted to amend the followin	g:				
A. If amending name, enter the new name of the	limited liabilit	y company here:			
The new name must be distinguishable and contain the words	"Limited Liability	Company," the designat	ion "LLC" or the	abbreviation '	L.L.C."
Enter new principal offices address, if applicable	: _			· · · · · · · · · · · · · · · · · · ·	·····
(Principal office address MUST BE A STREET A	DDRESS)			₹ <i></i>	A.,
	-			AUG 17	Provinces Planetes La baseria
Enter new mailing address, if applicable:	- a				E-MAN AND AND AND AND AND AND AND AND AND A
(Mailing address MAY BE A POST OFFICE BOX)				<u> </u>	L.
B. If amending the registered agent and/or r registered agent and/or the new registered office		e address on our	records, ente	r the nam	e of the ne
Name of New Registered Agent:	Jason	Barton			
New Registered Office Address:	9076	101St Ct Enter Florida stre	et address		<del></del>
	Vero P	each	, Florida _	379 600 Zip Cod	<u>, , , , , , , , , , , , , , , , , , , </u>
Naw Begistered Agent's Signature if changing Degis	tored Agent:	City		∠ıp Çou	:E

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, enter the title, name, and address of each person being added or removed from our records:

<u> </u>	ta ironi our recorus.	
MGR =	Manager	•
AMBR =	Authorized Member	

<u>Title</u>	<u>Name</u>	Address	Type of Action
mbr.	Jason Barton	8076 1015t Ct	Add
		8076 101St Ct Vero Beach, Fr 3296	☐ Remove
			☐ Change
			Add
			Remove
			Change
			□ Add
		· · · · · · · · · · · · · · · · · · ·	Remove
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fective date, if other than the date of filing:  In effective date is listed, the date must be specific and cannot be prior to date of filing  It: If the date inserted in this block does not meet the applicable statutor  icument's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an effect The 90th day after the record is filed.	tive time, at 12:01 a.m. on the earlier
ted 1941 Aug. 12, 2015.	
	ntative of a member

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Filing Fee: \$25.00