L15000034493

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SECRETARY OF STATE
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COVER LETTER

TO: Registration Se Division of Cor				
Peg Nutriti	on, LLC			
SUBJECT:		ited Liability Company		
	Amendment and fee(s) are sub ondence concerning this matter	•		
	Matthew T. Vanden Bosch	ı, Esq.		
		Name of Person		
	Matthew T. Vanden Bosch	, Attorney at Law		
		F:rm/Company		
	1080 South Federal Highw	vay	201 TAI	
		Address	ECRE SU	T
	Boynton Beach, FL 33435		2015 JUL -6 SECRETAR) TALLAHASS	
	myboseh@vandenbosehlaw	City/State and Zip Code	P P SEE. FL	アニーのロ
	•	to be used for future annual report notifi		
For further information of	concerning this matter, please c	all·	DA 55	
Matthew T. Vanden Bos	ch	561 827-2251 at ()_		
Name o	of Person	Area Code Daytime	Telephone Number	
Enclosed is a check for t	he 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 enclose	
	NA ANDROS			

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Cliffon 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 re (A Florida Limited Liability Company)	crords.)	
(**************************************		
The Articles of Organization for this Limited Liability Company were filed on February 24, Florida document number $\frac{L15000034493}{L15000034493}$	2015	_ and assigned
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	"LI.C" or the abbro	eviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		¥
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our rec	SECRETARY OF STAR	te name of the
egistered agent and/or the new registered office address here:	>)
Name of New Registered Agent:		
New Registered Office Address: Enter Florida street a	ddress	
City	Flor ida	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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Peter Klein	1331 South Federal Highway	Add
		Boynton Beach, FL 33435	■ Remove
			⊔ Change
AMBR	Peter Klein	1331 South Federal Highway	_ Add
		Boynton Beach, FL 33435	☐ Remove
			□ Change
			Add
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		TALLA	Change
		<u> </u>	of STA
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tive date, if other than the date of filing:	(amtional)
flective date is listed, the date must be specific and cannot be prior to date of filing.	(optional) ing or more than 90 days after filing.) Porsuant to 695
If the date inserted in this block does not meet the applicable statutor	ry filing requirements, this date will not be liste
ment's effective date on the Department of State's records.	
ecord specifies a delayed effective date, but not an effec	tive time, at 12:01 a.m. on the earlie
e 90th day after the record is filed.	
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JA VO.	
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Typed or printed name of signee

Filing Fee: \$25.00