

L15000194972

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

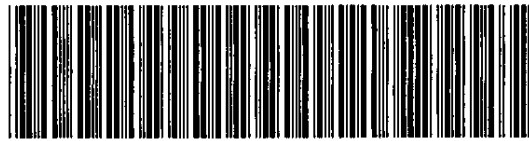
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600280215946

12/29/15--01016--020 **25.00

FILED

2015 DEC 28 A 11:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 30 2015

S MASON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Good Life USA, LLC, Document # L15000194972
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:

EDWARD DOVNER
Name of Person

1543 NW 165th Street
Unit 1543
Miami Gardens, FL 33169
Address

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

For further information concerning this matter, please call:

EDWARD DOVNER	At	(508)	958-9580
Name of Person		Area Code	Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee,
Certificate of Status Certified Copy Certificate of Status &

(additional copy is enclosed)

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**

GOOD LIFE USA, 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 11/23/15 and assigned

Florida document number **L15000194972**

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

N/A

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

N/A

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:

N/A

Name of New Registered Agent:

New Registered Office Address:

C. 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

Title	Name	Address	Type of Action
MGR	EDWARD DOVNER	5455 N. FEDERAL HWY., STE.L BOCA RATON, FL 33487	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change

MGR GOOD LIFE NATIONAL
HOLDINGS, LLC

5455 N. FEDERAL HWY., STE.L
BOCA RATON, FL 33487

☒ Add

☐ Remove

☐ Change

D. If amending any other information, enter change(s) here:

Article five (5) of the Articles of Organization is hereby amended to read as follows:

~~"ARTICLE V OWNERSHIP~~

~~Good Life Global Holdings, LLC shall own 100% of the ownership interest of the company."~~

This article is hereby revoked

E. Effective date, if other than the date of filing: (optional)

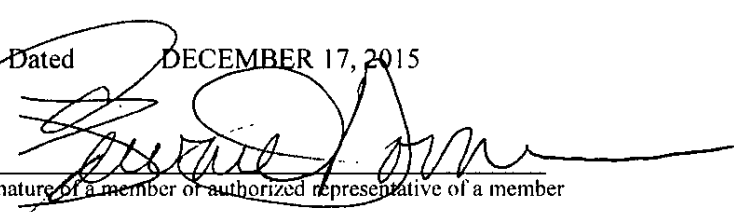
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)
Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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 earlier of:

(b) The 90th day after the record is filed.

Dated DECEMBER 17, 2015


Signature of a member or authorized representative of a member

Edward Downer
Typed or printed name of signee

2015 DEC 28 A 11:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Filing Fee: \$25.00