L16000064346

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
<u>.</u>		





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04/19/16--01028--012 **25.00



COVER LETTER

TO:	Registration Se Division of Cor					
CHDIE	YOGI SOB	I LLC				
SUBJE	CI:	Name of Lim	ited Liability Company			
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please r	eturn all correspo	ndence concerning this matter	to the following:			
		ARIE MREJEN, ESQ				
			Name of Person			
		ARIE MREJEN, P.A.				
Firm/Company						
1855 GRIFFIN RD, SUITE A-370						
			Address		134 135 136 137	
		DANIA, FL 33004			APR	T
			City/State and Zip Code		· 19	TLED
		AMREJEN@MREJENLA			7-:.	
			to be used for future annual report notificati	ion))
For furt	her information of	oncerning this matter, please ca	all:		20 E.	
ARIE N	MREJEN		954 771-3740 at ()		ŕ	
	Name o	f Person		lephone Number		
Enclose	d is a check for th	ne following amount:				
\$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	
	Registr Divisio P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 ussee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center	ns		

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YOGI SOBI LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our re Liability Company)	cords.)
The Articles of Organization for this Limited Liability Company	y were filed on	and assigned
lorida document number L16000064346		
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited lia	bility company here:	
YOGI SOBE, LLC		
he new name must be distinguishable and contain the words "Limited Liah	oility Company," the designation	LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
, , , , , , , , , , , , , , , , , , ,		
		7 7
nton now mailing address if applicable.		ت ت
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		9
B. If amending the registered agent and/or registered of egistered agent and/or the new registered office address he		ords, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	ddress
·		, Florida
	City	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 **Type of Action Title** <u>Name</u> **Address** _□ Add _□ Remove _□ Change _ Add _□ Remove _□ Change □ Add , ` ☐ Remove ☐ Change i _□ Change _□ Add ☐ Remove ☐ Change □ Add ☐ Remove

☐ Change

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	(optional)	
Effective date, if other than the date of filing:	ng or more than 90 days after filing.) Pursuant to 605.02	207 (3 Las th
(If an effective date is listed, the date must be specific and cannot be prior to date of filling		
Effective date, if other than the date of filing:	ry tiling requirements, this date will not be listed	
(If an effective date is listed, the date must be specific and cannot be prior to date of filing Note: If the date inserted in this block does not meet the applicable statutor document's effective date on the Department of State's records.		
(If an effective date is listed, the date must be specific and cannot be prior to date of filin Note: If the date inserted in this block does not meet the applicable statutor document's effective date on the Department of State's records. the record specifies a delayed effective date, but not an effective date.		of:
(If an effective date is listed, the date must be specific and cannot be prior to date of filin Note: If the date inserted in this block does not meet the applicable statutor document's effective date on the Department of State's records. the record specifies a delayed effective date, but not an effective date.		of:
(If an effective date is listed, the date must be specific and cannot be prior to date of filin Note: If the date inserted in this block does not meet the applicable statutor document's effective date on the Department of State's records. the record specifies a delayed effective date, but not an effective date.		of:
Note: If the date inserted in this block does not meet the applicable statutor document's effective date on the Department of State's records. the record specifies a delayed effective date, but not an effect) The 90th day after the record is filed.		of:

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Typed or printed name of signee

Filing Fee: \$25.00