L160000 74572

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Only/State/2)p/1 Holle #/
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
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Office Use Only



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Letter Number: 220A00022267

FLORIDA DEPARTMENT OF STATE Division of Corporations

November 6, 2020

RICH CAREY 731 GRAND CANYON DR. VALRICO, FL 33594

SUBJECT: GREEN FLOWER BOTANICALS, LLC

Ref. Number: L16000074572

We have received your document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a Limited Partnership, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

JEARLD H QUICK OPS

www.sunbiz.org

COVER LETTER

TO: Registration Sect Division of Corpo	ion orations		
SUBJECT: GFFEN	Flower Botan Name of Limite	iCals, LLC d Liability Company	
SUBJECT: Green Flower Botanicals Luck Name of Limited Lability Colapsiny The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Richard Carey Name of Person Creen Flower Botanicals Firm/Company 73 Grand Canyon Dr Address Valvice, FL 33594 City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code Area Code For further information concerning this matter, please call: Richard Carey Name of Person For further information concerning this matter. please call: Richard Carey Name of Person The Code of the following amount: See State of Status Certificate of Status Certificate of Status Certificate of Status Registration Section Division of Corporations P.O. Box 6327 Tallabassee, FL 32314 The Control of Tallabassee 2415 N. Monroe Street, Suite 810			
Please return all correspon-	dence concerning this matter to	the following:	
	Richard Car	Name of Person	
	Green Flowe	Firm/Company	
	731 Grand (Canyon Dr Address	
	Valrico, FL	33594 City/State and Zip Code	
	accounting of E-mail address (1	o of reent lawer not la object of lawer not la object of later annual report notification of the lawer notification of the	anicals.Cont
For further information ed			
			-1204 Ext 7 e Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Registration Division of C	Section Torporations	Registration Se Division of Co	rporations
			be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Green Flower Botanica (Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our records,) iability Company)	
The Articles of Organization for this Limited Liability Company	were filed on <u>4/15//</u>	and assigned
Florida document number <u>L 160000 74572</u> .	,	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" o	r the abbreviation "L.1C"
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		2 -
		n n
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		50
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter th</u>	e name of the new registere
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida street address	
	Flori	da
New Registered Agent's Signature, if changing Registered Agent:	Сцу	хуу сош
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of	performance of my duties, and rovided for in Chapter 605, F.S	I am familiar with and S. Or, if this document is

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>	<u>Name</u>	Address	Type of Action
MGR	Scarberough, Jesse A	2894 Heard Bridge Rd	□Add
	·	2894 Heard Bridge Rd	ÆRemove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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ffecti	ve date, if other than the date of filing: (optional)
an effi <u>ote:</u>	ective 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ent's effective date on the Department of State's records.
record is fil	d 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 ed.
ated .	
	Signature of a member or authorized representative of a member
	Signafure of a member or authorized representative of a member Rillard (av e.)
	Notice of Comment

Filing Fee: \$25.00