## L16 000 104265

Office Use Only



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## **COVER LETTER**

	egistration Se ivision of Cor							
SUBJECT	Runners Be	eans, LLC						
SOBOLET	• ———	Name of Lim	nited Liability Company					
The enclose	ed Articles of	Amendment and fee(s) are sub	omitted for filing.					
Please retur	m all correspo	ndence concerning this matter	to the following:					
		Natalie Sullivan						
			Name of Person					
		Runners Beans, LLC						
			Firm/Company	<u>_</u>				
		4500 140th Avenue N., Suite 101						
			Address	<del></del>				
		Clearwater, FL 33762						
		City/State and Zip Code						
		natalies@exportactionusa.c						
		E-mail address: (	to be used for future annual report notifi	ication)				
For further	information co	oncerning this matter, please ca	all:					
Natalie Sul	livan		727 538-4147					
	Name of	Person	at ()Area Code Daytime	Telephone Number				
Enclosed is	a check for th	e 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 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

Runners Beans, LLC	<del></del>		
( <u>Name of the Limited Liability Company</u> (A Florida Limited Lia	hility Company)	ras.)	
The Articles of Organization for this Limited Liability Company we lorida document number $\frac{L16000104265}{L16000104265}$ .	vere filed on May 27, 2016		_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabili	ty company here:		
he new name must be distinguishable and contain the words "Limited Liability"	v Company." the designation "L1	LC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		•	:"GIF
Principal office address MUST BE A STREET ADDRESS)		Ene form)	7
		ind III	Enterior Street
		183 ×	
Enter new mailing address, if applicable:		<u> </u>	
Mailing address MAY BE A POST OFFICE BOX)	<u></u> _	STATE	<u> </u>
	· · · · · · · · · · · · · · · · · · ·	<u> </u>	ū
3. If amending the registered agent and/or registered office address here:  Name of New Registered Agent:	ce address on our recor	ds, <u>enter th</u>	e name of th
New Registered Office Address:			
	Enter Florida street addr	ress	
	, i	Florida	Zip Code

If Changing Registered Agent, Signature of New Registered Agent

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 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	Roger Frampton	4500 140th Avenue N. Ste. 101, C1	Add
			■ Remove
			□ Change
MGR	Sally Brochocka	4500 140th Avenue N.	■ Add
		Suite 101	Remove
		Clearwater, FL 33762	Change
			Add
			■ Remove
			Change
AMBR	Sally Brochocka	4500 140th Avenue N	<b>≡</b> Add
		Suite 101	□ Remove
		Clearwater, FL 33762	Change
AMBR	Justin Brochocki	4500 140th Avenue N	<b>⊟</b> Add
		Suite 101	□ Remove
		Clearwater, FL 33762	🗆 Change
	Justin Brochocki	29 TH 10	□ Ādd-
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iment's effective date on the				ig requirement	.s. 11115 U	ate wii	not be liste
record specifies a dela ne 90th day after the			t an effective	time, at 12:	01 a.r	m. on	the earlie
ed July 12		2016					
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1/6	July	L OUX			## 1 Th	1 25	FI
1/0	Signature of	a member or author	orized representative	of a member	TARY SEE	<u>-</u>	m

Page 3 of 3

Filing Fee: \$25.00