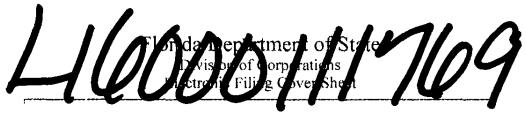
6/27/2016 10:01:39 AM PDT

13239628300 From: Amanda Sando Page 1 of 2

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H160001559143)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

200

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062

: (323) 962-9600

Phone Fax Number

: (323)962-3889

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

		_		
T	÷	7.	Address:	
		-	www.naaa.	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN XTREME SUNSHINE SMOOTHIE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu

Help

6/27/2016

COVER LETTER

			*	
TO: Registration Division of C	Section Corporations			
XTREM	ME SUNSHINE SMOOTHIE,	LLC		
SUBJECT:	Name of Lim	ited Liability Company		r.d
•	of Amendment and fee(s) are sub			
Please return all corre	spondence concerning this matter	to the following:		
	Cheyenne Moseley			
	· · · · · · · · · · · · · · · · · · ·	Name of Person	·	
	Legalzoom.com, Inc.			
		Firm/Company		
	101 N. Brand Blvd., 11t	h Floor		
		Address		
	Glendale, CA 91203			
	rlrblue@gmail.com	City/State and Zip Code		
	- -	to be used for future annual report notif	ication)	
For further information	n concerning this matter, please c	nll:		
Cheyenne Moseley		800 773-0888 es	kt. 9724	, •6;
Nan	ne of Person	Area Code Daytime	Telephone Number	
Enclosed is a check for	or the following amount:			
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
MA	ULING ADDRESS:	STREET/COURI	ER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

XTREME SUNSHINE SMOOTH	IE, LLC				
(Name of the Limited (A	Liability Compa Florida Limited	ny as it now appear Liability Company)	a on our records.)		
The Articles of Organization for this Limited Liab Florida document number L16000111769	oility Company	were filed on 06	/09/2016	and assigned	
This amendment is submitted to amend the follow	ring:				
A. If amending name, enter the new name of the	ne limited liab	ility company he	<u>re</u> :		
XTREME SUNSITIVE SMOOTHLES, LLC					
The new name must be distinguishable and end with the wo	rds "Limited Liab	ility Company," the	designation "LLC" or the a	bbreviation "L.L.C."	
Enter new principal offices address, if applicab	le:	544 South Hw	y. 27		
(Principal office address MUST BE A STREET.	ADDRESS)	Minneola, Flor	rida 34715		กติน
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO B. If amending the registered agent and/or registered agent and/or the new registered office	registered of	544 South Hw Minneola, Flor Mice address on	rida 34715	the name of the new	
Name of New Registered Agent:					
New Registered Office Address:	544 South Hw	vy. 27			
		Enter Flore	ida street address		
	Minncola		, Florida ³⁴	715	
		City		Zip Code	
New Registered Agent's Signature, if changing Reg					
I hereby accept the appointment as registered a provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the reg company has been notified in writing of this ch	and complete red agent as p gistered office	performance of a provided for in C	my duties, and I am fo Chapter 605, F.S. Or,	familiar with and if this document is	Nic

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

MGR = M $AMBR = A$	lanager authorized Member		
Title	Name	Address	Type of Action
			Add 55
			□ Rеточе
			🗖 Remove
			-
٠			☐ Remove
			□ Add
			□ Remove
-			□ Add
			☐ Remove

544 South Hwy. 27, Minneola, FL 34715	5
Effective date, if other than the date of filing:	cccipt or filed date and cannot be more than 90 days after tate)
(The effective date must be specific, cannot be prior to date of rethe date this document is filed by the Florida Department of St. Dated	eccipt or filed date and cannot be more than 90 days after

Page 3 of 3

Filing Fee: \$25.00