# 116000215046

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PICK-UP	WAIT	MAIL
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S. WARREN
'JUN 1 6 2017

# **COVER LETTER**

TO: Registration Sec Division of Corp			
Aesops Ve	nding Snacks & Drinks LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
		Isaiah Harris	
		Name of Person	extinction)  282  Exprime Telephone Number  \$60.00 Filing Fee, Certificate of Status & Certified Copy
	Aesop's \	Vending Snacks & Drinks LLC	
		Firm/Company	
	7	938 Mount Ranier Dr.	
	<u></u>	Address	<del></del>
	Ja	cksonville, Florida 32256	
		City/State and Zip Code	
	Aesop's Vending Snacks & Drinks LLC  Firm/Company  7938 Mount Ranier Dr.  Address  Jacksonville, Florida 32256  City/State and Zip Code  E-mail address: (to be used for future annual report notification)  primation concerning this matter, please call:  Isaiah Harris  904  370-9982  Area Code  Daytime Telephone Number		
For further information con	ncerning this matter, please ca	all:	
		at ()	<u> </u>
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	following amount:		
■_\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status &

## **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

<del>-</del> ,	ing Snacks & Drinks LLC		
(Name of the Limited Liab) (A Flori	Ility Company as it now appea da Limited Liability Company)	rs on our records.)	<del></del>
The Articles of Organization for this Limited Liability	Company were filed on	November 28, 2016	and assigned
Florida document numberL6000215046	·		
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the lir</u>	nited liability company h	ere:	
he new name must be distinguishable and contain the words "Li	mited Liability Company," the	lesignation "LLC" or the a	boreviationL.C."
Enter new principal offices address, if applicable:			E NO
Principal office address MUST BE A STREET ADD	PRESS)		SS F F
			51. S1. S1.
Enter new mailing address, if applicable:			<u> </u>
Mailing address MAY BE A POST OFFICE BOX)			
	<del> </del>		
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad-		our records, <u>enter</u>	the name of the n
Name of New Registered Agent:			
New Registered Office Address:	7938 Mount Ran	ier Dr.	
	Enter Flo	rida street address	
	Jacksonville	, Florida	32256
<del></del>	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

<u>Title</u>	<u>Name</u>	Address	Type of Action
Manager	Kathi D. Harris	7938 Mount Ranier Dr. Jax, Fl. 322	Add
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C. Effective date, if other (If an effective date is listed	r than the date of filir	ıg:		(optional)	
(If an effective date is listed <b>Note:</b> If the date insert	l, the date must be specific ar ted in this block does not	id cannot be prior to dat meet the applicable	e of filing or more than 90 statutory filing requiren	days after filing.) Pursua ients, this date will no	nt to 605.02 t be listed :
document's effective da	ate on the Department of	State's records.			
the record specifies  The 90th day after	a delayed effective er the record is filed	date, but not an	effective time, at :	12:01 a.m. on the	e earlier
o) The Sour day did	in the record is med	•			
Dated UNG	13 th	2017		<b>三</b>	17
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	2	Swal .	Havis	经新	<u> </u>
	Signature of a	member or authorized	facus representative of a member		
		Social, a member or authorized	Harry representative of a member  Harry		

Page 3 of 3

Filing Fee: \$25.00